



A. W. A. Alije

Annual Report

of the

Medical Officer of Health

for the Year 1962

G. O'BRIEN, M.B., Ch.B., D.P.H.,

Medical Officer of Health and Principal School Medical Officer

Telephone: St. Helens 24061 (Extension 231)

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COUNTY BOROUGH OF ST. HELENS



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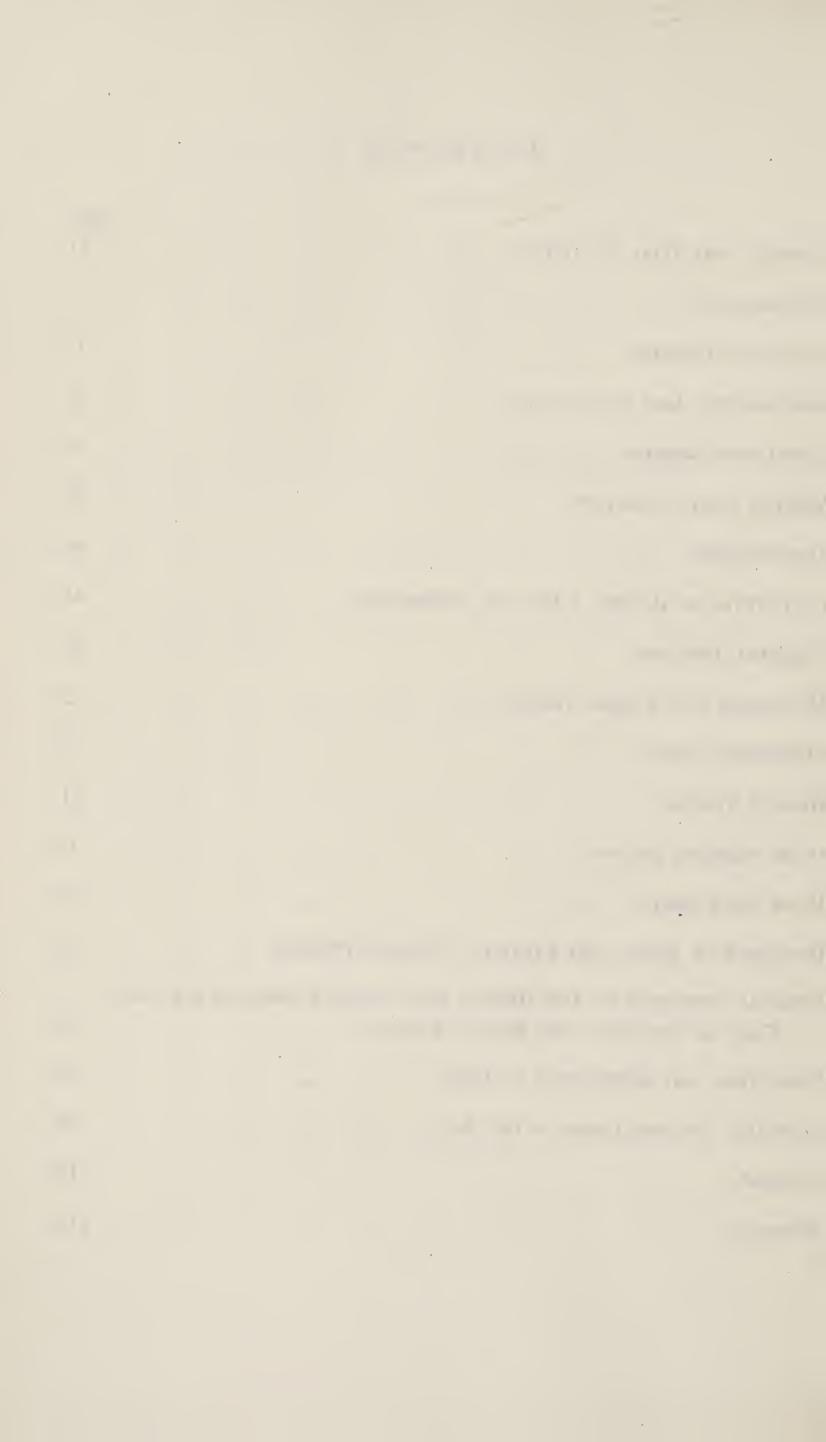
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TO THE MAYOR, ALDERMEN AND COUNCILLORS OF THE COUNTY BOROUGH OF ST. HELENS

Mr. Mayor, Ladies and Gentlemen,

I beg to submit the Report on the health of St. Helens for the year 1962.

The following statement shows some of the principal statistical rates during the past five years.

	1958	1959	1960	1961	1962
Birth rate per 1,000 of population	16.9	17.1	17.5	17.6	18.3
Death rate per 1,000 of population	11.4	10.8	11.5	12.7	11.8
Infant Mortality per 1,000 live births	35.8	24.3	39.2	28.3	22.2
Maternal Mortality per 1,000 total births	0.51	1.02	0.50	0.0	1.0
Tuberculosis death rate per 1,000 of population	0.17	0.12	0.09	0.09	0.11

The birth rate at 18.3 per 1,000 estimated population was the highest since 1948. It is also interesting to note that the infantile mortality rate at 22.2 per 1,000 live births was the lowest ever recorded in the County Borough. The previous lowest was the figure of 24.3 per 1,000 live births returned in 1959. As a matter of record, the infantile mortality figure for England and Wales as a whole for 1962 was 21.7. The decrease in the rate was mainly due to a drop in neo-natal deaths in the category of premature births. This, however, is not the final answer to the problem of prematurity and we must continue to press for improved facilities for premature babies in the area of the Local Management Committee.

The general death rate in the population of 11.8 per 1,000 was lower than the previous year, and this was despite a widespread incidence of respiratory disease in the early months of the year, particularly amongst aged persons. The percentage of total deaths attributable to cancer showed no significant change from the previous four years, and in particular there was no increase in the category of deaths from lung cancer. In the field of general infectious diseases, there was no significant incidence of any major disease, but as a result of the smallpox outbreaks in Yorkshire and South Wales there was a heavy demand on the Local Authority vaccination service. Continuing progress was made in the protection of the population against diphtheria and poliomyelitis. There were no recorded cases of either disease during the year, and the introduction of the Sabin Oral Vaccine during the spring revolutionised the technique of poliomyelitis immunisation, and simplified clinic procedures.

Comment must be made once again on the staff position. Over the years the Local Authority has operated successful in-service training schemes for both Health Visitors and Public Health Inspectors, and due to this the position regarding Health Visitor staffing is now only nearing normal establishment. It is regretted, however, that the same cannot be said regarding Public Health Inspectors, and the training scheme in operation, in fact, barely keeps pace with losses from the staff due to transfer to other Authorities. The matter has received much consideration from the Committee, who still express reluctance to depart from Whitley Council recommendations regarding salary,

in order to attract staff, and are equally reluctant to lower the standard of seniority and experience required in promoting candidates to senior appointments.

There was a continuing expansion of the Home Help Service during the year which carried in its wake staff increases, and at the end of the year the Home Help staffing had risen to the equivalent of 46 whole-time helps. Comment should also be made on the success of the Health Committee scheme for in-service training of Mental Health staff, and during the year four students were in training as Mental Welfare Officers and four in training as Assistant Training Centre Supervisors.

Negotiations with the Ministry of Agriculture, Fisheries and Food proceeded during the year regarding the plans for a new Public Abattoir, and at the same time meetings were held with representatives of the local trade regarding the possible provision of a Meat Market attached to the new Abattoir. Under the Slaughterhouse Regulations, application for deferment of the 'appointed day' was made and this was postponed until the 1st January, 1965. Until such time the existing Abattoir will continue to function.

Under the Housing Act, the programme of slum clearance continued at a steady pace, and during the year 223 houses were confirmed from previous surveys and 188 represented from new areas or undertakings.

During the year, under Circular 2/62, the 10 year plan (shown in the Appendix to this report) for social and domiciliary services was approved by the Local Authority and submitted to the Ministry of Health. Under this scheme, a staffing review was recommended and phased over the 10 year period, and more important the capital building schemes of the Health Committee were collated and timed for appropriate Ministry approval. Work was commenced during the year on the new Ashtons Green Clinic and the new Junior Training Centre and preliminary draft plans agreed by the Committee for the provision of a hostel for mentally subnormal children under 16 years. Discussions also took place towards the end of the year regarding the provision of a new clinic for the Sutton area, and an allocation of suitable land was made for the project. The transfer of land was also agreed in principle for the planning and erection of a new rehabilitation hostel for the transitional treatment of patients discharged from hospitals following mental illness.

It will be seen, therefore, that in the sphere of planning in the year under consideration, projects covering a wide and varied field have been under consideration. The future years will undoubtedly see the maturity of many of these plans and provide the necessary background for the expansion of community schemes in the coming years.

It has been a year of ceaseless activity in all branches of the Department, and despite shortages in personnel, the work has been accomplished without undue fuss. The strain on clerical, medical and nursing staff was particularly great in the field of mass immunisation, and my thanks are due to those members of the staff who worked so hard and cheerfully in dealing with the public demand. In the field of environmental hygiene, much of the solid day-to-day work has been carried out against a background of severe staff shortage, but despite this no major sphere of work was neglected. To all those members of the staff my thanks are due, and not least to members of the Council for the help and sympathetic consideration shown by them in the work of the Department during the year.

I have the honour to be, Your obedient servant,

PUBLIC HEALTH COMMITTEE, 1962/63

Chairman:

ALDERMAN M. A. SHARD, J.P.

Deputy-Chairman:

COUNCILLOR J. F. McDONNELL

The Right Worshipful the Mayor COUNCILLOR T. R. O'BRIEN, J.P.

Alderman W. Burrows, O.B.E., J.P.

" J. E. Hughes, O.B.E., J.P.

" J. Thackray, J.P.

,, J. A. Waring, J.P.

Councillor A. Brown

,, R. S. Ellison, J.P.

" J. J. Henebery, J.P.

" E. Kerr

, P. M. Lowe

M. McNamara

.. S. Moore

.. T. Wilcock

HEALTH COMMITTEE

The Public Health Committee and the following:

Mrs. H. B. Bates (co-opted)

Mrs. B. McGhie (co-opted)

Dr. D. R. Holden (nominated by the Local Medical Committee)

Mr. W. Davies (nominated by the St. Helens Executive Council)

Mrs. E. M. L. Else, J.P. (nominated by St. Helens and District Hospital Management Committee).

STAFF

Medical Officer of Health and Principal School Medical Officer: GERALD O'BRIEN, M.B., Ch.B., D.P.H.

Deputy Medical Officer of Health:

JAMES HUTCHINSON WALSH, L.R.C.S.I., L.R.C.P.I., L.M., D.P.H.

Assistant Medical Officers of Health:

Enid M. Hughes, M.B., Ch.B. Mary Pilling, M.R.C.S., L.R.C.P., C.P.H. John E. O'Malley, M.R.C.S., L.R.C.P., D.P.H. Mary Kathleen Boland, M.B., B.Ch.

Dental Officers:

William John Meakin, L.D.S., R.C.S., Principal School Dental Officer. Annie Patricia Farrell, B.D.S., School Dental Officer

Public Health Inspectors:

Chief Public Health Inspector: Nathaniel Birch
James R. R. Norris, Deputy Chief Public Health Inspector
Griffith R. Hull, Atmospheric Pollution Inspector
Henry T. Rothwell, Specialist Inspector
Fred Platt, Specialist Inspector
Thomas Dean, Specialist Inspector
Norman Smith, Specialist Inspector
John B. Douglas, Specialist Inspector
Kenneth Simm, Specialist Inspector
Derrick G. Roberts, Public Health Inspector (to 3.6.62)
Ronald Rimmer, Public Health Inspector (to 31.12.62)
John S. Bradbury, Public Health Inspector
Stanley G. Williams, Public Health Inspector
Eric Sawyer, Public Health Inspector (from 11.6.62)

Health Visitors and School Health Visitors:

Superintendent: Rita Lamb

Lilian S. Boardman
Emily E. Cameron
Edith Lilian Farmer
Margaret Gandy
Teresa J. Howard
Catherine Knowles
Eileen O'Connor
Constance M. Pennington
Jean Whiteside (nee Pennington)
(to 28.2.62)
Annie Pimblett

Sheila M. Rothwell
Marian Singleton
Leah Fazackerley (Part-time)
May Fairclough (Part-time)
Mary Hughes (to 25.6.62)
Veronica M. O'Ryan
Doreen A. Caffrey
Josephine C. Whelan (nee McMonagle)
(from 23.7.62)
Sheila Rimmer (from 23.7.62)

STAFF—continued

Student Health Visitors:

Josephine C. McMonagle (to 22.7.62)
Sheila Rimmer (to 22.7.62)
Joan Donnellan (from 1.8.62)
Margaret T. Fleming (from 8.8.62)
Margaret M. P. Hill (from 1.8.62)
Mary G. MacManamin (from 27.8.62)

Midwives:

Non-Medical Supervisor of Midwives: Audrey I. Robinson

Margaret Boulton Ethel M. Burrows Enid Edwards Eileen Evans Sarah J. Gilroy Kathleen Gaskell Olive M. Hardman
Caroline Leonard
Elsie A. Parr
Kathleen Somers
Elizabeth Williams (to 4.6.62)
Olwen Chisholm (from 22.1.62)

Chief Clerk: J. J. Spencer, D.P.A.

Welfare Officer (Prevention of Illness, Care and After-Care):
Miss M. Miller

Tuberculosis Health Visitor (Part-time): Mrs. Bridget Jackman

Physiotherapist: Miss Angela M. McLoughlin, M.C.S.P. (to 2.5.62)

Home Help Organiser: Mrs. E. G. Oldridge (to 28.3.62)

Miss Joan Cargill (from 9.7.62 to 31.8.62) Mrs. Elizabeth Henton (from 28.9.62)

Mental Welfare Officers:

Herbert E. Causey
Mary McKenna
Norma M. Rickarby, B.Com. (Social Study) (to 30.12.62)
John R. Bratt (Sectional Clerk, Mental Health Service)

Junior Training Centre Supervisor: Miss I. W. Marsh

STAFF—continued

Clerk/Dispenser:

William John Selvey (also part-time Welfare Officer, Special Treatment Centre) to 31.1.62.

William Owen Ross (also part-time Welfare Officer, Special Treatment Centre) from 14.5.62.

Ambulance Service:

G. M. Norman (Ambulance Superintendent)

Day Nursery:
Margaret R. Ephgrave (Matron)

The following are Part-time Officers:

Consultant Obstetricians:

Percy Malpas, M.B., Ch.B., L.R.C.P., F.R.C.S., F.R.C.O.G.

Henry V. Corbett, M.Sc., M.D., Ch.B., F.R.C.S., L.R.C.P., M.M.S.A., M.R.C.O.G.

Area Chest Physician:

J. B. H. MacArthur, M.B., B.S., M.R.C.P.E.

Public Analyst and Agricultural Analyst:

J. G. Sherratt, B.Sc., F.R.I.C.

Anaesthetist:

M. J. McCann, L.R.C.P. (Ireland), Anaesthetist

.

Dental Nurse: Maureen Barnes

I.—GENERAL ANI	O VITAL STA	TISTICS—1	1962		
Area (acres) Population (estimated, mid-year 1 Rateable Value Product of a penny rate	962)			8, 108, £1,099, £4,	260
				Í	
STATISTICAL	SUMMARY	FOR 1962 M.	F.	Total	
Live Births:— Legitimate			925 43	1,900 79	
	Totals	1,011	968	1,979	
Birth Rate per 1,000 of the estima	ated population			*****	18.3
Still-Births:—M. 19, F. 24; Total Rate per 1,000 total (live a	: 43. nd still) births				21.3
Total live and still births:—Live . Still b	 oirths			1,	,979 43
				2	,022
Illegitimate live births: 79					
Percentage of total live births: 49		ŧ,			
Deaths:—M. 696, F. 581; Total: Crude Death Rate per 1,00	1,277 00 of the estima	ited populati	ion		11.8
Deaths of infants under one year			M.	F. T	
Legitimate Illegitimate			18	25 1	43
			18	26	44
Death Rate of infants under one	year of age:—				
All infants per 1,000 live b Legitimate infants per 1,00 Illegitimate infants per 1,0	irths O legitimate liv	e births		•••••	22.2 22.6 12.7
Neo-Natal Deaths: (i.e. Deaths of Deaths: M. 9 F	f infants under	one month)			
Neo-Natal Death Rate: (per 1,00	0 live births)		•••••	•••••	12.6
Peri-Natal Mortality Rate					31.7
Number of women dying from child-birth:	diseases and		of preg	gnancy	2
Maternal Mortality Rate per 1,00					1.0
Whoming Cough					****
Gastritis, Enteritis a " Tuberculosis (all for	and Diarrhoea				5 12
Table V.S.1 gives a summ	ary of the vital	statistics for	the pa	ist 50 y	ears.

Table V.S.1. Statistics for St. Helens

			4	ate			DE	ATH	S FRC	M		
YEAR	Population	Birth Rate	Crude Death Rate	Infant Mortality Rate	Smallpox	Measles	Scarlet Fever	Typhoid Fever	Typhus Fever	‡ Diarrhoea	Whooping Cough	Diphtheria
1913 1914 1915† 1916† 1917† 1918† 1918† 1922 1923 1924 1925 1926 1927 1928 1929 1930 1931 1932 1933 1934 1935 1936 1937 1938 1937 1948† 1948† 1948† 1948† 1948† 1948† 1950 1951 1952 1953 1954 1955 1958 1959 1950 1951 1952 1953 1954 1955 1956 1957 1958 1959 1960 1961 1962	99,460 100,775 92,240 90,000 90,600 100,805 104,822 104,900 106,400 107,100 108,700 109,600 110,500 109,200 109,200 109,200 109,200 107,600 *108,300 107,600 *108,000 107,600 *108,000 107,400 107,200 106,600	32.2 33.3 32.1 26.5 22.0 24.1 25.5 31.8 29.1 26.4 24.4 24.1 23.9 23.2 20.8 21.8 20.7 21.5 20.1 18.0 19.1 18.3 18.6 17.7 19.8 20.3 22.2 21.3 17.9 16.9 17.5 17.6 18.3	18.9 17.1 19.3 16.8 16.5 21.2 15.0 13.5 12.0 12.0 12.0 12.0 12.0 12.1 14.0 10.6 11.4 12.5 11.4 11.6 13.4 11.3 11.3 11.3 11.3 11.7 10.7 10.7 11.8 11.8	155 138 129 108 123 126 117 113 103 100 102 88 98 114 80 88 89 116 56 88 70 79 78 71 65 72 57 60 60 70 61 41 33 24 39 28 22	000000000000000000000000000000000000000	189 25 126 265 265 265 265 27 60 10 10 10 10 10 10 10 10 10 10 10 10 10	26 5 12 30 20 4 9 7 5 4 4 1 7 1 2 5 6 2 0 1 2 2 2 4 2 3 3 0 1 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0	446220200212300110003111000000000000000000	000000000400000000000000000000000000000	120 98 78 64 37 48 35 44 62 28 24 36 35 43 26 29 21 21 21 21 21 21 21 21 21 21	18 24 40 34 19 24 7 7 24 3 10 11 33 4 5 21 13 8 0 4 5 2 1 15 3 7 6 4 5 15 1 4 2 0 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	15 832 85 79 100 25 13 55 84 66 70 11 47 08 18 17 26 51 14 23 19 10 10 10 10 10 10 10 10 10 10 10 10 10

† Estimated civil population.

* Borough extended.

‡ Gastritis, Enteritis and Diarrhoea from 1950 inclusive.

POPULATION.—The Registrar General's estimate of population for mid-year 1962 was 108,260 compared with 108,480 for mid-year 1961. During the year the natural increase in population (i.e. excess of births over deaths) was 702.

BIRTHS.—The number of live births registered during 1962 as belonging to St. Helens was 1,979, giving a birth rate of 18.3 per 1,000 of the estimated population. This rate is the highest since 1948. The birth rate when adjusted by the area comparability factor of 0.94 gives a rate of 17.2 per 1,000 of the population. The birth rate for England and Wales during 1962 was 18.0

Of the 1,979 births, 1,011 were males and 968 females, giving a sex ratio of 1,044 males to every 1,000 females.

DEATHS.—During 1962 there were 1,277 deaths from all causes (696 males and 581 females) giving a crude death rate of 11.8 per 1,000 of the population, as compared with 12.7 in 1961. The adjusted death rate for the year (for national comparison) after applying the area comparability factor of 1.31 was 15.5. per 1,000 of the population. The death rate for England and Wales as a whole for 1962 was 11.9 per 1,000 of the population.

Table V.S.4 shows that of these deaths, 203 were due to cancer and 579 to diseases of the heart and circulatory system. These two causes, therefore, accounted for 782 out of a total of 1,277 deaths, i.e. approximately 61%. There were 12 deaths from tuberculosis (all forms) during the year compared with 10 in the previous year.

The infantile mortality rate was 22.2 per 1,000 live births, compared with 28.3 in the previous year. This is the lowest rate recorded in the Borough, the previous lowest rate being 24.3 in 1959. The rate for England and Wales was 21.4 per 1,000 live births.

The maternal mortality rate for the year 1962 was 1.0 per 1,000 live and still births.

Further reference to the infantile and maternal mortality death rates is made in the appropriate sections of this Report.

Causes of Death.—Figures relating to the causes of, and ages at, death are given in Table V.S.4.

Deaths from Tuberculosis.—Tuberculosis was the cause of 0.9% of all deaths that occurred during 1962. The corresponding percentage in 1961 was 0.7%. The ages at which these deaths occurred are shown in Table V.S.4. Further reference is made in the special section (VII) on Tuberculosis.

Malignant Diseases.—The deaths from these diseases during the past five years were as follows:—

Table V.S.2.

AGE GROUPS	1958	1959	1960	1961	1962
Under 1 year	_	_		-	
1	1		1	_	_
5—		_	_	_	
15—			3	-	
25—	18	19	18	23	12
45—	78	99	90	100	92
65—	63	46	56	77	52
75 and over	63	48	38	52	47
Total	223	212	206	252	203
Percentage of the total deaths Death rate per 1,000 of population	17.7 2.0	1 7 .8 1.9	16.3 1.9	18.3 2.3	16.7 1.9

The following table V.S.3, gives particulars of deaths due to malignant causes during the last five years:

Table V.S.3.

Cause	1958		1959		19	60	19	61	1962	
Cause	М.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Cancer— Stomach Lung Other	22 50 52	21 3 75	18 47 64	11 7 65	19 41 55	16 7 68	31 55 67	16 10 73	26 43 38	15 3 78
Totals	124	99	129	83	115	91	153	99	107	96
	2	223	2	212		206		252		03

INFANTILE MORTALITY.—During 1962 there were 44 deaths of infants under one year of age (18 males and 26 females), corresponding to an infantile mortality rate of 22.2 per 1,000 live births. This compares with 54 deaths and a rate of 28.3 in 1961.

Careful supervision continued to be exercised during the year and investigations have been carried out in every instance where death has occurred in a child under one year of age. A summary of the findings following these investigations is given in the section of this Report dealing with Maternity and Child Welfare.

Table V.S.4.

Causes of, and ages at, death during 1962

Causes of Death	Sex	All Ages	0—1	1—	At 5—	Ages 15—	25—	45—	65—	75—
Tuberculosis Resp	M F	10 2	_	_	=		1	3	4	2
Tuberculosis Other	M F	_			_			_		
Syphilitic Disease	M F			_	=				=	=
Diphtheria	M F		_	_	_				_	
Whooping Cough	M F		=							=
Meningococcal Infections	M F	<u></u>			=	1	_	=	=	=
Acute Poliomyelitis	M F		=		=			=		_
Measles	M F		_	=			=			
Other Infective and Parasitic Diseases	M F	1			=	_				
Malignant Neoplasm, Stomach	M F	26 15			_	*****	2	12 5	9 5	3 5
Malignant Neoplasm, Lung, Bronchus	M F	43					1	25 1	14	3
Malignant Neoplasm, Breast	M	19				_		$\frac{-}{13}$	1	4
Malignant Neoplasm, Uterus	M F	11							<u></u>	
Other Malignant and Lymphatic Neoplasms	M F	38 48					6	13 17	12 9	13 16
Leukaemia, Aleukaemia	M F	3 2		1	_		1	1	 1	
Diabetes	M F	2 8						4	 1 4	1
Vascular Lesions of Nervous System	M F	67 92		_	_		3	20 25	19 23	25 44
Coronary Disease, Angina	M F	144 77					10	59 17	55 35	20 24
Hypertension with Heart Disease	M F	8		_	=			1 2	5 4	
Other Heart Disease	M F	56 78	_	_	=	<u></u>	2	12 5	17 21	25 51
Other Circulatory Disease	M F	25 22	_				1	4	9 8	11 13
Influenza	M F	17	1	_		<u> </u>	_	4	7 2	5 3
Pneumonia	M F	53 53	6 4		1	_	2	3 7	18 12	23 28
Bronchitis	M F	85 25	_		_	_		27 5	30 8	28 12
Other Diseases of Respiratory System	M F	15				1	_	3	8	4 2
Ulcer of Stomach and Duodenum	M F	7 2	_	_			1	1	3 1	2
Gastritis, Enteritis and Diarrhoea	M F	1 4			=			_	<u> </u>	1 1
Nephritis and Nephrosis	M F	5 5			_	<u> </u>	<u> </u>	3 1	1	1 2

Table V.S.4.—continued.

Causes of Death	Sex	All Ages	0—1	1—	5—At	Ages 15—	25—	45—	65—	75—
Hyperplasia of Prostate	M F	7	=	_	ernue	_	_	_	4_	3
Pregnancy, Childbirth, Abortion	MF	2	=	_	=		2		_	=
Congenital Malformations	M F	6 7	5 7		_	_	_	1	_	=
Other Defined and Ill-defined Diseases	MF	52 58	6 11		1	1	3 3	15	4 10	20 24
Motor Vehicle Accidents	M F	2	=			1	=	1	1	_
All Other Accidents	M F	14 19		1	1		1	4	1 4	12
Suicide	M F	10	_	=	_		1 3	3 2	4	2
Homicide and Operations of War	M F	1	_	_	<u> </u>	_	-	_	=	
TOTALS: All Causes	M F	696 581	18 26	4	3	4 5	29 21	214 125	226 152	198 250
GRAND TOTALS		1277	. 44	5	4	9	50	339	378	448

II.—METEOROLOGY

Rainfall.—The total rainfall for 1962 as measured at the Victoria Park Observatory was 26.98 inches compared with 34.59 inches in 1961. At Eccleston Hill Waterworks, 29.24 inches were recorded compared with 33.31 inches in the previous year. The highest day's rainfall of the year (0.81 inches) occurred during the 24 hour period ending at 9.0 a.m. on the 10th July. The average daily rainfall for May, June, July and August was 0.08 inches, compared with 0.08 inches for the corresponding period in 1961. The wettest month was August with 4.53 inches. The driest month was June with 0.98 inches.

Sunshine—During the year, 1,168 hours of sunshine were recorded, and the highest reading was 13.5 hours on the 24th May. The average daily sunshine during May, June, July and August was just over 5 hours.

Temperature.—Temperatures of 70°F and over were recorded on only 8 days during the summer. The highest temperature recorded was 74.5°F on the 8th June and the lowest was 16°F on the 1st January.

Wind Pressure.—On 9 days during October to December, a wind force of 20 m.p.h. and over was recorded. The Anemograph was being overhauled at the makers from January to October. The strongest wind recorded was 42 m.p.h. on the 16th December.

The following Table M.1 shows the maximum and minimum temperature recorded in each month and the distribution of sunshine and rainfall throughout the year.

Table M.1.

Month	Maximum temperature recorded in shade	Minimum temperature recorded in shade	Sunshine	No. of sunless days	Rainfall	No. of days on which rain fell
T	°F	°F	Hours	11	Inches	10
January	55.4	17.0	41	11	2.71	19
February	54.3	28.4	49	11	1.49	21
March		20.0	$73\frac{1}{2}$	11	1.34	13
April	65.8	30.0	164	4	2.22	15
May	64.6	30.9	182	1	2.63	17
June	74.5	38.5	1893		0.98	12
July		46.0	1381	3	2.15	12
August	70.0	47.4	$150\frac{7}{2}$		4.53	20
September	68.0	40.5	771	7	3.03	20
Ostohon	65.0	32.2	$44\frac{1}{2}$	15	2.00	16
Morromban	57.7	27.0	372	13	1.37	14
December	52.8	17.6	$21\frac{1}{2}$	18	2.53	15
	مارس		1168	94	26.98	194

III.—INFECTIOUS DISEASES

During the year 1962 there was no marked incidence of the common infectious diseases. The outbreaks of smallpox, however, which occurred in Yorkshire and South Wales and the reaction of the public to the publicity given to the outbreaks by press and television resulted in an unprecedented demand for smallpox vaccination in St. Helens. During January and February the demand was at its maximum, gradually dying off towards the end of the first six months period of the year. There were, fortunately, no cases reported in the town and swift vaccination of known travellers from the epidemic areas assured the prevention of any sporadic secondary cases.

There were no cases of poliomyelitis during the year under review and 1962 was also the eleventh year since any case of diphtheria occurred. No greater tribute could be paid to the efficacy of the schemes of vaccination and immunisation against these diseases, and it is incredible that even in these days any parent should hesitate to take advantage of the protection offered to their children by vaccination procedures.

There were 103 cases of scarlet fever notified during the year, mainly in the early months, but these cases were very mild in nature and were confined to the young child population. Towards the end of the year there was a tendency to an increase in the number of cases of measles and also in November and December there was rather a marked incidence in the category of non-notifiable respiratory ailments. The general practitioners in the town were kept very busy and there was a noticeable degree of absenteeism amongst the workers in the major industries.

Special comment should be made of a major outbreak of food poisoning during the year. This was first reported from a canteen on the local trading estate, where a large number of cases of diarrhoea and stomach upset occurred amongst the workers. Investigations revealed that a total of 61 people who had partaken of the same meal had suffered from symptoms and of these 61, 37 were found to have faecal specimens positive to Clostridium Welchii. Recovery amongst those affected was rapid, the symptoms being only moderately severe, and the probable conclusion was that the source of infection arose from a gravy made from liquor obtained from the pork meat which had formed the major item in the meal.

In addition to the major outbreak above, there were three other sporadic cases of food poisoning notified during the year. In two of the cases it was not possible to trace the organism causing the illness, and the third case occurred in an elderly patient who had been admitted to a hospital in the area for the investigation of a chronic bowel complaint. The diagnosis of a salmonella infection was finally made and investigations which were carried out revealed the presence in the home of a symptomless excretor of Salmonella Stanley. No foodstuff could be implicated and all other contacts of the excretor were found to be non-infectious.

The original case in hospital died, the cause of death being given as (a) Cardiac Failure, (b) Salmonella Infection, (c) Potassium Dehydration.

Table I.D.1.

Notification of Infectious Diseases received during the undermentioned years.

	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962
Smallpox Scarlet Fever Diphtheria Measles Whooping Cough Enteric Fever Dysentery Erysipelas Pneumonia* Typhus Fever Puerperal Pyrexia Ophthalmia Neonatorum Acute Poliomyelitis Meningococcal Infections Malaria	92 1600 613 1 4 10 36 - 1 3 - 9		-658 -1083 484 -198 15 35 -4 1 5	286 295 286 67 9 27 - 1	208 2331 284 5 35 8 42 - 3 1 17 -			118 	215 1371 34 -21 4 19 -4 -7 1	

^{*} Acute Primary and Influenzal

Table I.D.2.

Infectious Diseases.—Total number of cases notified, number of cases admitted to isolation hospital, and the total deaths from each disease as shown in Registrar General's classification of deaths.

Year 1962

	Notifications received	Cases admitted to hospital	Total Deaths
	103	<u></u>	=
*****	500 16	9	_
	39	7 3 5	
*- ***	$\frac{10}{4}$	$\frac{3}{3}$	- -
******	2	2	1
*****		1	1
		received 103 500 16 39 4 10	received to hospital

Table I.D.3.

Age distribution of cases of Infectious Diseases notified.

Year 1962

DISEASE	Notifications received	Under 1	1—	2—	3—	4	5	10—	15—	20—	35	45—	65	Age unknown
Smallpox Scarlet Fever Diphtheria Measles Whooping Cough Enteric Fever Dysentery Erysipelas Pneumonia* Typhus Fever Puerperal Pyrexia Ophthalmia Neonatorum Acute Poliomyelitis Acute Encephalitis Meningococcal Infections Malaria Food Poisoning		- 3 - 20 1 - 2 - - - - 5 -	- 46 1 - 5 - - 1 -	- 14 - 64 2 - 3 - - - - - - - - - -		- 15 - 80 3 - 4 - - - - 1	 51 209 6 -7 - 1 1	9 15 - 4 1 1	- 1 - 1 - - - 1	- - 1 - 2 1 - 3 - 1				

^{*}Acute Primary and Influenzal

Disinfection and Disinfestation.—By arrangement with the Liverpool Regional Hospital Board the use of facilities for disinfection of personal articles of patients is retained at the St. Helens Peasley Cross Isolation Hospital. Facilities are also retained at this Hospital in the Cleansing Block for the treatment of scabies and the cleansing of verminous persons. During 1962, 15 cases of scabies were treated, and 13 infested persons were cleansed under these arrangements. In 1961 there were no cases of scabies and 21 infested persons.

Laboratory Work.—The following Table, I.D.4., shows the number of specimens received by the Health Department for distribution to various laboratories during the year.

Table I.D.4.

Specimens	Number	Results		
Specimens	Received	Positive	Negative	
Swabs for Diphtheria Blood for Rh Factor Gastro-Enteritis, Dysentery, and	382	244	138	
Food Poisoning	445	74	371	
Total	827	318	509	

IV.—IMMUNISATION AND VACCINATION

Diphtheria Immunisation.—In 1962 the Local Authority's Scheme for Diphtheria Immunisation of the child population was continued as previously. Table I.V.1, below, indicates the number of children in different age groups who received primary immunisation and reinforcing injections in 1962.

Table I.V.1.

Number of children immunised against Diphtheria during 1962.

Born:	1962	1961	1960	1959	1958	1953- 1957	1948- 1952	Total
Primary Immunisations Local Authority Medical Officers	418 191	330 225	26 24	12 6	45	313	40 9	1184 469
Total	609	555	50	18	50	322	49	1653
Reinforcing Injections Local Authority Medical Officers	_	35	377 21	49 11	133	511 14	96 4	1201 58
	-	39	398	60	137	525	100	1259

The following shows the record of primary immunisations carried out since 1957.

1957	1958	1959	1960	1961	
1433	1530	1879	2415	2372	

DIPHTHERIA IMMUNISATION

The vaccination scheme for the immunisation of the child population against diphtheria was interfered with to a marked degree during the first six months of 1962, by the overwhelming demand for smallpox vaccination. During this period parents were simply not interested in any form of vaccination, other than that against smallpox. As a result of this, diphtheria immunisation was pushed into the background. During the autumn the scheme ran into further difficulties when the remarkably high incidence of measles, colds and winter ailments in the child population, resulted in many children having their injection deferred until the earlier months of 1963. Despite these difficulties, 1,653 children had their primary course of injections, and a further 1,259 were given their booster doses. It is to be hoped that the coming year will be a less difficult one from the point of view of diphtheria immunisation, and that this will result in a considerable improvement in the situation.

The following Table, I.V.2., shows the number of children immunised against Whooping Cough under this scheme during the year.

Table I.V.2.

Number of children immunised against Whooping Cough during 1962.

A CHARLET OF CHILDREN THE		a abay					-19 -10	
Born:	1962	1961	1960	1959	1958	1953- 1957	1948- 1952	Total
Primary Immunisations Combined with other antigens Local Authority Medical Officers Private Practitioners	418 191	330 225	26 24	11 6	11 5	95 6	8	891 465
Total	609	555	50	17	16	101	8	1356
Reinforcing Injections Combined with other antigens Local Authority Medical Officers Private Practitioners Total		35 4 39	377 21 398	49 11 60	66 4 70	237 14 251	4	764 58 822
Posta anno esta esta esta esta esta esta esta esta								

Vaccination against Smallpox.—The following Table, I.V.3., is a record of the vaccinations carried out during 1962.

Table I.V.3.

Number of Vaccinations against Smallpox during 1962

	Under 1 year	1 year	2-4 years	5-14 years	15 years and over	Total
Vaccinations Local Authority Medical Officers Private Practitioners	461 404	68 79	100 83	364 264	294 386	1287 1216
Total	865	147	183	628	680	2503
Re-Vaccinations Local Authority Medical Officers Private Practitioners		1 3	18 28	249 176	988 1221	1256 1428
Total		4	46	425	2209	2684

SMALLPOX VACCINATION

The year 1962 will very probably be remembered in the field of immunisation as the year of the smallpox scare. While no case of smallpox occurred in the County Borough, there were continual rumours and scares, and these, together with the wide publicity given to the outbreak of smallpox in Yorkshire and South Wales, were sufficient to keep the public in an almost constant state of tension and in some cases near panic. Despite every effort to reassure people and to advise that mass vaccination was not necessary, large crowds of people formed daily outside the clinics and literally demanded vaccination, and this demand by the public had to be met. Some 2,503 people received their primary vaccination during the year, and a further 2,684 re-vaccinations were carried out.

POLIOMYELITIS VACCINATION, 1962

In February of 1962, the Sabin oral vaccine was made available for the first time in St. Helens. Some 1,151 cases were given a full course of three doses of the oral vaccine before the end of the year. In addition, a further 12,388 cases who had previously received two injections of Salk received a third dose of the Sabin oral vaccine. Particulars of the vaccinations carried out during the year can be found in the table which follows this report.

Apart from the obvious advantages of an oral vaccine over one given by injection, the Sabin vaccine confers an intestinal immunity. The advantage of this is that it protects the community from the disease by preventing the spread of infection from non-paralytic cases who may be unknowingly carrying the virus. In addition, the immunity following vaccination with the Sabin vaccine develops in a matter of days, as compared with weeks following vaccination with the Salk vaccine. The overall position in relation to the level of poliomyelitis vaccination remains reasonably satisfactory. Some 79% of the population under the age of twenty years have been vaccinated. However, following the intensive poliomyelitis vaccination campaigns of recent years, a certain amount of apathy has recently been apparent in some parents, and this has made itself felt in a slight decrease in the level of vaccination of infants in the early years of life. Unfortunately, these are the age groups that are most susceptible to poliomyelitis. It is difficult to understand the reluctance on the part of some parents to bring their babies for vaccination. After all, no injections are involved and the vaccine is safe and effective. The mass vaccination schemes have controlled poliomyelitis, but final eradication from the community may well depend on how the apathy of these careless and lazy-minded parents towards vaccination can be counteracted by health education methods.

TABLE I.V.4.

DURING	Total		44£047 080£	91	ı	1	
VACCINE DU	of persons who received re-inforcing injection	General Practitioners	ω4 <u>−π</u> ωννωυ	50	1		
WITH SALK V	No. of persons re-inforcing	Local Authority Medical Officers	27.77	41	1	1	The state of the s
OUT W	Total		262 2222 233 25222 244 252 252 252 252 252 252 253 253 253 253	1338		20	1350
RRIED	who received njection	General	23 24 24 25 25 25 25 25 25 25 25 25 25 25 25 25	1042		20	1000
VACCINATIONS	No. of persons who rece the third injection	Local Authority Medical Officers	2000000 -	296		-	700
	Total		22r E G E r T S S E 8 8 9 0 2 r E 7 8 9 9 1 r r r 0 1 4 4 2 5 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	588	32	1	ענא
POLIOMYELITIS	who completed ections	General	\$20.00000000000000000000000000000000000	443	l		442
OF	No. of persons who co	Local Authority Medical Officers	NWUW4W-WU-11-11-11-11-W1W-11-11-W1W44001W44N9V-001	145	il cases 32 .g.	-	. 177
PARTICULARS	Date of Birth		1922 1922 1922 1922 1922 1922 1922 1922	Total Special Categories:	(a) Ante-natal cases (b) Others, e.g. Hospital Staff.	etc.	Total
(A)							

	Total		162 332 339 792 747 747 713	4,710	4,710
DURING 1962	who received injection	General Practitioners	13 113 113 113 113 114 113	267	267
GIVEN	No. of persons re-inforcing	Local Authority Medical Officers	149 296 368 374 667	4,443	4,443
VACCINE	Total		2014 4429 4729 4729 4729 4730 644 4730 744 745 745 745 745 745 745 745 745 745	12,384	12,388
ELITIS ORAL	who received one 2 Salk injections	General Practitioners	1453 153 153 153 153 154 155 155 155 155 155 155 155 155 155	2,386	2,386
POLIOMY	No. of persons who oral dose after 2	Local Authority Medical Officers	264 265 276 276 276 276 276 276 276 276	9,998	10,002
ARS OF	Total		48822222122224887-2000 \$ 87 - 2010 \$ 87 -	1,151	1,151
) PARTICULARS	who completed doses	General Practitioners	L-4-044644640000-0 - 0 -4664-6164	264	264
(B)	f persons three	Local Authority Medical Officers	7.7.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2	al 887	. 288
			1922 1923 1924 1925 1926 1927 1927 1928 1928 1929 1929 1920 1920 1920 1920 1920 1920	· Ante-Natal	

10-12 years

Over 11 years

In order to regularise the various immunisation and vaccination procedures, the following schedule for immunisation of children is in use in the Department:—

SCHEDULE FOR IMMUNISATION OF CHILDREN ALTERNATIVE PROGRAMMES WHEN IN POLIOMYELITIS VACCINATION :-

- (A) Sabin Oral Vaccine is used.
- (B) Salk Vaccine is used.

The schedule will be used by Health Visitors and other Health Department workers in advising parents to have their children immunised. For this reason it is considered that General Practitioners should be informed, as they will have an opportunity, when dealing with their own child patients, of utilising the suggested schedule and so standardising procedure throughout the town.

(A) WHEN SABIN ORAL VACCINE IS USED FOR POLIOMYELITIS

	ACCINATION ACCINATION
Age of Child	Antigen
Second month	First injection Triple antigen (Diphtheria-tetanus-pertussis).
Third month	Second dose, triple antigen.
Fourth month	Third dose, triple antigen.
Sixth month	First dose of Oral Sabin Poliomyelitis vaccine.
Seventh month	Second dose of Oral Sabin Poliomyelitis vaccine.
Eighth month	Third dose of Oral Sabin Poliomyelitis vaccine.
18th month	Smallpox Vaccination.
20—22nd month	First booster dose, triple antigen.
Five years (school entry)	Second booster dose, triple antigen.
Five years (school entry)	Fourth dose of Oral Sabin Poliomyelitis

vaccine (where necessary).

B.C.G. Vaccination.

Diphtheria booster dose, T.A.F.

(B) WHEN SALK VACCINE IS USED FOR POLIOMYELITIS VACCINATION

Age of child	Antigen
Second month	First injection triple antigen (Diphtheria-tetanus-pertussis).
Third month	Second dose, triple antigen.
Fourth month	Third dose, triple antigen.
Sixth month	First injection poliomyelitis vaccine.
Seventh month	Second injection poliomyelitis vaccine.
15-16 months	Third injection poliomyelitis vaccine.
18th month	Smallpox Vaccination.
20-22 months	First booster dose, triple antigen.
Five years (school entry)	Second booster dose, triple antigen.
Five years (school entry)	Fourth injection poliomyelitis vaccine.
10-12 years	Diphtheria booster dose, T.A.F.
Over 11 years	B.C.G. Vaccination.

COMMENT

Pertussis

It is not advisable to give pertussis antigen to children with a known history of traumatic or infectious involvement of the central nervous system.

Diphtheria

In Diphtheria immunisation T.A.F. should be the antigen of choice in the following cases:

- (1) Where there is a history of sensitivity reaction, either local or general.
- (2) Where the original antigens used in primary immunisation are no longer available.
- (3) In all cases of children over six years of age.

Smallpox

Specific contra-indications to smallpox vaccination are as follows:

- (a) Recent exposure to infectious disease.
- (b) Septic skin conditions.
- (c) Infantile eczema or any other allergic condition.
- (d) Failure of a baby to thrive.
- (e) Hypogammaglobulinaemia.
- (f) Cortico-steroid treatment.

Poliomyelitis

The administration of anti-poliomyelitis vaccine is also contra-indicated where a patient is undergoing cortico-steroid treatment.

December, 1962 (Revised).

V.—AMBULANCE SERVICE

Table A.S.1 gives the details of the work carried out by the Ambulance Service in St. Helens during 1962.

38334 Total 3141 3062 3062 2894 3390 3118 3355 3153 3153 3176 3398 Hospital Out-patients 30024 2401 23307 2342 22206 2471 2600 2600 2710 2300 Hospital Transfers General Service Removal 33 33 33 33 33 33 33 467 Hospital Discharges 1795 Admissions Hospital 312 2442 265 265 203 203 223 223 223 223 2866 Maternity 1010 94 93 93 93 94 94 94 94 94 Emergency Sudden Home 381 Accidents Works 283 Street 795 Month February
March
April
May
June
July
August
September
October November December TOTAI January

CALLS ATTENDED BY AMBULANCE SERVICE DURING 1962.

Table A.S.1.

AMBULANCE SERVICE MILEAGES DURING 1962.

Total	9904 8950 8953 9219 10272 9173 10384 10334 9713 10292 10362	117394
RDJ 766		13680
SE NDJ 999	1918 1706 1089 1749 2224 1600 1821 2083 1662 1957 1043	21039
DUAL PURPOSE 8 HDJ 119 NDJ 999	1181 1593 1512 1593 1593 1359 1460 1853 1302 1261	18372
DD1 928	1740 1506 1782 1545 1595 1290 1363 1204 1247 1621	17501
GDJ 111	833 397 1056 736 559 495 1101 949 689 683	9373
EDJ 411	869 606 726 738 738 873 873 874 644 644 93	6992
LANCES DDJ 274	956 584 509 424 250 22 821 882 882 886 968	8008
IER AMBU CDJ 234	600 842 127 127 117 755 666 726	3833
2/4 STRETCHER AMBULANCES BDJ 97 CDJ 233 CDJ 234 DDJ 274	899 850 1005 834 874 746 863 720 784 667 689	9782
2/2 BDJ 97	67 89 196 196 1196	552
BDJ 828	841 777 729 1006 995 728 363 363 363 804 917 469	8262
Month	January February March April May June July August September October November December	TOTAL

Vehicles.

The following vehicles were in commission at the end of the year:—

Austin, BDJ 828 (year 1951).

Austin, CDJ 233 (year 1952).

Austin, CDJ 234 (year 1952).

Austin, DDJ 274 (year 1953).

Austin, EDJ 411 (year 1955).

Austin, GDJ 111 (year 1956).

Bedford, DDJ 928 (year 1954)

(Dual-purpose).

Austin, HDJ 119 (year 1957) (Dual purpose)

Austin, NDJ 999 (year 1960) (Dual purpose)

Austin, RDJ 766 (year 1961) (Dual purpose).

Patients.

The total number of patients carried by the Ambulance Service in 1962 shows an increase of 5,661 over 1961.

Type of Call	1961	1962	Increase	Decrease
Out-Patients	24,491	30,014	5,523	
Street Accidents	727	795	68	
Works Accidents	239	283	44	
Sudden Illness	641	713	72	
Hospital Discharge	1,741	1,795	54	
Hospital Transfer	445	467	22 -	-
Home Accidents	399	381		18
Maternity	1,047	1,010		37
Hospital Admissions	2,933	2,866		67
			5,783	122

The work done by the Ambulance Service is detailed in Table A.S.1. There was an increase in the total number of patients carried of 5,661 as compared with the previous year, and the increase was almost entirely in the category of out-patient removals. Once again the need for the utmost vigilance in the review of out-patient cases in the hospital departments should be emphasised, and during the year a renewed approach was made by the Health Department to the hospital authorities asking for their help and co-operation in ensuring that there was no unnecessary use of ambulance vehicles. At the same time it is fully appreciated that there has been an expansion of hospital out-patient services over the years, and this must be expected to continue and be reflected in increased out-patient removals.

It is interesting to note that although the overall mileage completed by the service during 1962 showed an appreciable increase over 1961 of 2,039 miles, the average miles per patient dropped from 3.531 in 1961 to 3.063 in 1962.

Recently there have been various expressions of opinion thoughout the country regarding the need for more advanced first-aid training for the personnel of the Ambulance Services. In the year under review there was an increase in the category of accident removals both from the street and from works and there is certainly no question that the casualties occurring in our present day society require skilled and efficient handling. The basic qualification is essentially the possession of a first-aid certificate, and an annual revision course is the least one might expect in order to keep a well-trained attendant in a state of efficient training. The department each year organises courses for personnel but there has been a tendency over recent years for the attendance at the lectures and tutorials to fall off. It is felt that not only must disciplinary action be taken in the future to remedy this state of affairs, but the entire scheme of training must be revised and consideration given to a more advanced type of course.

During the year, out of a staff of 28, only 20 men sat for the First-aid examination. There was 1 failure and 8 members of the staff could not qualify for the examination through lack of sufficient attendances at lectures.

In the regional round of the National Competition, the St. Helens team gave an impressive display of their First-aid skill and aptitude in dealing with emergency situations. They were a trifle unlucky not to win the regional round but the members of the team deserved commendation for the good work accomplished both in training and in their competition standards.

During 1962, following final approval of plans by the Ministry, a start was made on the erection of the new Ambulance Headquarters in Jackson Street. The scheme will be completed and functioning during 1963

VI.—MENTAL HEALTH SERVICE

The Mental Health Act, 1959, places upon the Local Health Authority the responsibility for the provision of a comprehensive community care scheme for those persons suffering from mental disorder and the provision of care and after-care schemes to cater for those persons discharged from hospital. The Act defines four categories of mental illness:

- (1) Mental Disorder.
- (2) Severe Subnormality.
- (3) Subnormality.
- (4) Psychopathic Disorder.

It will be remembered that the Local Authority proposals to the Ministry under Section 28 of the National Health Service Act, 1946, for the provision of community Mental Health Services in St. Helens were approved by the Minister during 1960. The proposals visualised:

- (1) The provision of a new Junior Training Centre and a residential hostel for juniors, together with the provision of Adult Training Centres.
- (2) The strengthening of the Mental Health Service Staff.
- (3) The expansion of guardianship functions.
- (4) The provision of adult hostel accommodation for rehabilitation following mental illness.
- (5) The provision of day centres and social clubs.
- (6) The establishment of occupational therapy and home training services.

Administration. The powers and functions of the Local Health Authority under the Mental Health Act, 1959, are carried out by the Local Health Committee, which has appointed a Mental Health Sub-Committee.

This Sub-Committee consists of the Chairman and Deputy-Chairman of the Health Committee, together with five other members of the Health Committee and three co-opted members (two of whom are medical men, one being the Medical Superintendent of the Local Psychiatric Hospital). All powers and duties of the Local Health Authority, so far as they relate to Mental Health, may be referred to this Sub-Committee for report to the Health Committee. It was found convenient, however, during the year to take all matters affecting the Mental Health Service direct to the Health Committee.

Mental Health Staff.—The Medical Officer of Health is responsible for the organization and control of the local services, with the day-to-day administration of the Mental Health Department being supervised by an Assistant Medical Officer of Health. Use is also made of the Consultant Psychiatrist at present on the staff of the Local Education Authority and, where necessary, of specialist Medical Officers of the Regional Hospital Board. The non-medical staff consists of three Mental Welfare Officers (1 male, 2 females), three Trainee Mental Welfare Officers (1 male, 2 females), and one Sectional Clerk.

During the year one male Mental Welfare Officer was seconded for training in London to the Younghusband Course at the Mary Ward Institute. One male Trainee Mental Welfare Officer was admitted to the two year course at Liverpool for the National Certificate of Social Work. These arrangements obviously required a re-deployment of staff duties, and this was effected by seconding the Sectional Clerk to carry out rota and other duties of a Mental Welfare Officer, aided by a temporary Mental Welfare Assistant recruited to the staff during the period of absence of the Officers named above.

The staff of the day Training Centre during the year consisted of a Supervisor, six Assistant Supervisors (two untrained, four trained), two Guide and General Helps, together with four student trainees (one male, three females). Two of the students were in attendance at the Diploma Course in Manchester conducted by the National Association for Mental Health.

Co-ordination with Regional Hospital Boards. There are frequent consultations with the Board's Consultant Psychiatrists, and growing use is made of the domiciliary visiting service whereby the Psychiatrists are called in and are able to visit patients in their own homes. In addition, one or other of the Mental Welfare Officers make frequent visits to the local hospital psychiatric out-patient sessions.

The Local Health Authority is also undertaking, on request, the supervision of patients on trial or on licence from Psychiatric Hospitals.

The number of visits paid, the number of cases involved and the number of reports submitted during 1962 were as follows:

Mental Subnormality	No. of Cases	No. of Visits Paid	No. of Reports Submitted
Reports on home conditions for trial leave or discharge	6	10	8
Reports on home conditions for the renewal of authority for detention	3	5	3
Progress Reports (Patients on Trial Leave)	1	3	1

Duties Delegated to Voluntary Associations. No duties of the Local Health Authority have been delegated to voluntary organisations. The St. Helens Mental Welfare Society, however, assists in welfare activities among mental defectives, in connection with the provision of clothing and footwear, day outings, holidays, Christmas parties, etc. The Local Health Authority continued its grant to the funds of the Society for this work. The Women's Voluntary Services also assist in the provision of clothing and footwear.

ACCOUNT OF WORK UNDERTAKEN IN THE COMMUNITY UNDER SECTION 28, NATIONAL HEALTH SERVICE ACT, 1946

Prevention. In dealing with the problem of prevention of mental illness the activities of the Mental Welfare Officers were focussed mainly on domiciliary visiting and arranging contacts with suitable organisations for those in need of advice or early treatment.

Close co-operation has been maintained by the Mental Health Service with practitioners and Consultant Psychiatrists of the local psychiatric hospital. During the year 93 attendances were made by the Mental Welfare Officers of the Local Authority at the local Hospital Psychiatric Out-Patient Clinic.

In addition, a valuable link is provided by frequent case consultations between the Health Visitors of the various districts in the town and the Mental Welfare Officers.

The growing importance of community care in the work of preventive mental health is shown by the following breakdown list of cases dealt with during the year. Inevitably some of these cases finished up by undergoing hospital treatment, but increasing emphasis on this type of work leads to much desired early diagnosis and early treatment. In many other cases it will be noted that aid and assistance was given in the adjustment of social problems and the bulk of these cases were referred from Consultant Psychiatrists, General Practitioners, and even on requests from patients themselves. In dealing with the following cases, the Mental Welfare Officers paid a total of 250 visits.

- 34 cases with domestic difficulties who were visited and improvement brought about in the home circumstances. In some of these cases, material assistance was obtained from various voluntary organisations.
- 18 cases of which 9 were admitted to Geriatric and Senile Dementia units.
- 29 cases were persuaded to undergo out-patient treatment.
- 58 cases were receiving supervisory visits.
- 2 cases were admitted to voluntary homes.
- 3 cases were admitted to a general hospital.
- 15 cases were assisted in the provision of clothing and bedding.
 - 1 case was admitted to a hostel.
 - 6 cases referred to N.S.P.C.C.
 - 4 cases were assisted over employment.
 - 2 cases were referred to the Probation Service.

Care. In this sphere of activity it was found that the majority of the problems dealt with arise in family life as a result of the admission of a member of the family to hospital. Advice and assistance were sought from the Mental Health Department on many occasions by relatives and not infrequently by request of the patients themselves. In other instances, at the request of Consultant Hospital Psychiatrists in the area, home visits were paid to relatives of in-patients and social histories completed or clinic appointments arranged.

During the year 175 visits were made in dealing with the undermentioned cases:—

63 cases of patients in hospitals whose home difficulties were to some extent detrimental to their recovery. Instances of these were National Assistance grants, housing difficulties, property worries, National Insurance and Pension problems and visiting arrangements.

2 cases in respect of which social histories were completed.

- 10 cases in which special interviews were arranged for the relatives of patients at out-patient clinics.
 - 4 cases were referred to the Children's Department and/or the N.S.P.C.C.
 - 7 cases were dealt with in connection with the protection of property

2 cases were assisted for employment on discharge.

3 cases in which assistance was sought from the R.S.P.C.A.

After-Care. The following summary gives the Local Health Authority's after-care record during 1962:—

Number on list at 1/1/1962 Discharged persons requesting after-care	•••••	*****	95 36
Deleted from list during 1962		•••••	131
Number on list at 31/12/1962	*****		101

After-care continues to provide a constant sphere of activity and great use is made of psychiatric surveillance at the local hospital out-patient clinics. The Mental Health Service continues to be an integral part of the whole process for rehabilitation of discharged patients and close liaison is maintained with the disablement resettlement service of the Ministry of Labour, Welfare Officers of local firms, voluntary organisations, etc.

In dealing with the following cases during the year, 281 home visits were made by the Mental Welfare Officers:—

- 17 cases requiring further treatment were re-admitted to hospitals.
- 13 cases completely recovered, needing no further after-care service.
- 16 cases were assisted with lodgings and hostel accommodation.
- 10 cases were assisted in connection with employment.
- 95 cases receiving supervisory visits, in which domestic and other problems were dealt with.
- 18 cases were assisted in the provision of food and clothing.
- 23 cases were referred for out-patient treatment.
- 7 cases were referred to the Children's Department and/or the N.S.P.C.C.

In closing, it would be pointed out that the number of people seeking the aid of the prevention, care and after-care services is increasing yearly. This burden is eased by the fact that a happy relationship exists between the local medical practitioners, the local psychiatric hospitals, the consultant psychiatrists and the mental welfare officers. During the year under review, a total of 1,414 interviews were conducted in this connection.

THE MENTAL HEALTH ACT, 1959.

1962. Table A gives the sources of referral and classification of new patients, whilst Table B shows the disposal of cases which were referred with a view to Welfare Officers under the above Act from 1st January, 1962, to 31st December, The following two tables show the work undertaken by the Mental Application for Admission being made.

Number of patients referred to Local Health Authority during year ended 31st December, 1962.

Table A

	Total		106	45	43	10	1	4	209
	16 & over	F.	54	15	28			3	100
Totals	16 &	Z.	52	24	15		1		92
	Under 16	压		2		4			7
	Und	Z.		4		9			01
=	cover	II.	1	1				-	L
Severely Sub-normal	16 & over	Ä.		S					g year
Seve Sub-n	Under 16	正		2		2			Jurin
	Und	Z.		4		5			rred (
	over	F.	-	7				-	refer
orma	16 & over	Ä.		4			-		tients
Sub-normal	Under 16	표				2		-	Total number of patients referred during year
	Ond	M.				-			nber
ų	Under 16 16 & over	됴	1					-	al nur
Psychopath	16 8	Ä.	1						Tot
Psych	ler 16	压	1						
		Ä.					1		
=	Under 16 16 & over	표.	53	13	15 28		1	1	
ally I	16 &	Ä.	52	15	15				
Mentally III	ler 16	표.							
	Und	Ä.		1					
	Referred by		(a) General Practitioners	(b) Hospitals, on discharge from in-patient treatment	(c) Hospitals, after or during out-patient or day treatment	(d) Local Education Authorities	(e) Police and Courts	(f) Other sources	

Table B

		Male	Female	Total
1.	Admitted to Psychiatric Hospitals— (a) On Emergency Applications under Section 29 (b) On Applications for Admission for Observa-	15	14	29
	tion under Section 25	8	16	24
	(c) On Applications for Admission for Treatment under Section 26	9	13	22
2.	Notified as an alleged person suffering from mental disorder and dealt with as follows:— (a) Informal Admissions (Section 5) (b) No Application Made	14 2	18 4	32
3.	Other notified admissions during the year:— Persons normally resident within the County Borough of St. Helens, admitted to Psychiatric			
	Hospitals under the Mental Health Act, 1959	1	3	4

In addition, a number of cases (not St. Helens residents) were dealt with by virtue of the fact that they were overtaken by mental illness while in the County Borough of St. Helens. 9 of these cases were dealt with during the year (6 males and 3 females).

HOSPITAL RETURN FOR 1962.

The following summary gives the disposal of known St. Helens patients in Psychiatric Hospitals during the year:—

No. of Health Service Patients Hospitals on 1/1/1962 Admissions during the year			itric 	Male 140 47	Female 189 64	Total 329 111
				187	253	440
	M.	F.	Tot	al		
Deaths during the year	8	12	20)		
Discharges during the year	37	62	99	- 45	74	119
	· D	1 •	. •			
No. of Health Service Patients Hospitals on 31/12/1962	ın Ps	sych1	atric	142	179	321

The number of patients in hospitals at the end of the year is at the rate of 2.92 per 1,000 of the population.

MENTAL SUBNORMALITY

Ascertainment. The total number of cases reported and referred as Mentally Sub-normal from the 1st January, 1962 to 31st December, 1962 was 14.

Particulars of these cases are shown in the following Tables.

Table M.H.1.

Cases Reported and Referred

		er 16 ars	16 ye	Total	
	M.	F.	M.	F.	Total
(a) Cases ascertained during 1962 as suffering from subnormality or severe subnormality. Action taken on reports from:— (i) Local Education Authorities on children— 1. Whilst at school or liable to attend school 2. On leaving special schools 3. On leaving ordinary schools (ii) Police or Courts (iii) Other sources	6	4 - 1 1			10 — 1 3
thus excluded from (a) and (b)		—		_	
Total number of cases reported in 1962	6	6		2	14

Table M.H.2.

Disposal of Cases

	Under yea			years ov er	Total
	M.	F.	M.	F.	Total
(a) Those found suffering from subnormality:— (i) Placed under Supervision (ii) Placed under Guardianship	$\frac{5}{2}$	<u>4</u> 1		<u>1</u> 1	9 1 4
	7	5		2	14

Hospital Waiting List. As at 31st December it will be noted from the following Table M.H.3 that 7 cases (4 males and 3 females) still awaited vacancies in hospitals. Particular difficulty was experienced in obtaining vacancies for male cases.

Table M.H.3.

	Unde yea	er 16	16 yea	ers and	Total
	M.	F.	M.	F.	
1. In urgent need of hospital care (i) Cot and chair cases	1 1 —		1		1 4 —
2. Not in urgent need of hospital care (i) Ambulant low grade cases (ii) Medium grade cases	1	1			1 1
	3	1	1	2	7

None of the above cases is considered to be in need of hospital care solely because of poor environment.

Cases in Hospitals for Mentally Subnormal Persons. The number of cases from the County Borough of St. Helens who were in Hospitals for Mentally Subnormal Persons and in Special Hospital Care at 31st December, 1962, is given in the following table:

Table M.H.4.

Hospital					ler 16	16 ye and	Total		
					M.	F.	M.	F.	
Ashton House Birkenhead Brockhall Calderstones Chorley (Eaves Cranage Hall Greaves Hall Lisieux Hall Mary Dendy H Moss Side Newchurch Northgate Offerton House Olive Mount Orchard Dene Rathbone Royal Albert St. Joseph's St. Raphael's Swinton The Manor Thingwall Hall Whitecross Ho	ome				- 1 1 - 3 - 3 - 1 1 1 - 2 - - - 2		1 21 15 -1 3 3 2 1 1 4 6 58	2 1 10 13 1 2 5 — 1 — 6 1 — — 1 — 2 — 45	2 2 34 29 1 3 12 3 3 1 9 1 1 1 1 7 1 - 1 2 6 2

The following Table shows the classification of persons in Hospitals at 31/12/1962:

		Male			Female		Total		
	Under observation or treatment	Hospital Orders or equivalent	Informal	Under observation or treatment	Hospital Orders or equivalent	Informal	M.	F.	Т.
Under 16 years	2	1	9	3	_	2	12	5	17
16 years and over	17	6	37	17	3	25	60	45	105
Total	19	7	46	20	3	27	72	50	122

Total number of Reported and Referred Cases at 31st December, 1962.

The total number of reported and referred cases for whom the Local Health Authority of the County Borough was responsible at the 31st December was as follows:—

Table M.H.5.

	Under 16 years		16 year ov	Total	
	M.	F.	M.	F.	Total
Under Supervision Under Guardianship	<u>26</u>	23	71	59	179 5
	26	23	74	61	184

SUPERVISION

This work is carried out by the Mental Welfare Officers.

These cases are visited regularly and reports of the visits submitted to the Medical Officer of Health. In this way, besides maintaining contact with the patient, it is possible for the Mental Welfare Officers to become aware of changes in family and other circumstances. The visits occasionally bring to light domestic problems, and in some cases convalescent holidays have been arranged, hospital or general practitioner treatment obtained, and the help of various organisations sought for the patients and relatives. In this connection, much work has been done in co-operation with the social services, probation services, the N.S.P.C.C. and other bodies. Any special recommendations which have been made are noted and placed before the Health Committee.

The number of visits made to these cases during the year was 368.

Guardianship.—At the beginning of 1962, two cases were under the guardianship of relatives or friends, but during the year two cases were discharged from hospital to the guardianship of this Local Health Authority and one guardianship order was transferred from Lancashire County Council.

These cases are visited regularly and in each case a responsible Medical Officer has been appointed. As with Supervision cases, any special recommendations are noted and placed before the Health Committee. During the year 24 visits were made by the Mental Welfare Officers.

Classification of Cases under Guardianship and Supervision.—In Section A of the following Table, cases under Supervision and Guardianship have been classified as to their suitability for various types of training, whilst those actually receiving such training at the 31st December, 1962, are shown in Section B.

Table M.H.6.

	Under 16 years		16 years and over		Total
	M.	F.	M.	F.	
Section A.					
Considered suitable for :— (i) Junior Training Centre	21	19 2 1	3 36 9	12 24 8	55 63 19
	23	22	48	44	137
Section B.					
Number of cases receiving training on 31.12.1962 (i) Junior Training Centre	16	17 —	18 	12	63
	16	17	18	12	63

Cases removed from Lists during 1962. Of the listed cases who were in hospitals or under community care on the 1st January, 1962, the following ceased to be under any of these forms of supervision as on 31st December, 1962.

Died, removed from area, or lost sight of	Male 3	Female 1	Total 4
	3	1	4

Short-Term Care.—Short-term care was arranged for a number of persons suffering from subnormality or severe subnormality while their families took their annual holiday or some member of the family was in hospital, etc.

	Under 16 years		16 years and over		Total
	M.		M.	F.	
Admitted to National Health Service Hospitals	8	2	2	2	14
Admitted to Private Nursing Homes	3				3
	11	2	2	2	17

During the year 580 interviews took place in the Mental Health Department in dealing with parents and relatives of mentally subnormal persons seeking advice and assistance.,

Training Centre.—The Training Centre is situated at "Stanley House", Sinclair Street, St. Helens, and at the start of the year the staff consisted of a Supervisor, 6 Assistant Supervisors and 2 Guide/Helps. As outlined earlier in the Report, two trainees are attending the Diploma Course and two student trainees were appointed in mid-year for in-service training.

The premises comprise a large assembly hall (which is utilised as a gymnasium and occupational therapy room for the older pupils), two class-rooms for the juniors and one dining-room.

Meals are provided through the School Meals Service of the Local Education Authority, the charges being in line with those operating in the schools throughout the Borough.

A free 'bus service is provided for the transport of the attenders to and from the Centre, and they travel under the supervision of members of the Training Centre Staff.

Pupils are graded according to mental age and ability, and the curriculum includes instruction in handwork, sewing and embroidery, rug-making, singing and dancing.

The pupils' work was exhibited at the Christmas parties provided by the St. Helens Mental Welfare Society. On these occasions each child received a gift from Father Christmas.

During the summer, the senior pupils were taken on a coach trip to Morecambe and the junior and infant pupils to Colwyn Bay and Chester, funds for these functions being provided by the St. Helens Mental Welfare Society.

The Centre is open from Monday to Friday of each week, and conforms to the normal terms and holidays which apply to the Primary Schools in the Borough.

Below is an extract from the attendance register:—

	Borough Pupils		Cou Pup		Total
	M.	F.	M.	F.	
Number of pupils on Register on 1.1.1962	34 2 2 34 28	27 3 1 29 21	1 1 -		62 5 4 63 49

Plans for the provision of a new Day Junior Training Centre were proceeded with during the year. Following consultations with Officers of the Ministry of Health, the previous proposals were completely revised and new draft plans were prepared. These were the subject of consultation with the technical officers of the Ministry in London and agreement was reached on several major points affecting the design. Following final submission to the Health Committee, the plans were approved and loan sanction obtained from the Ministry. Work on the project was commenced in the autumn of the year and it is hoped that the Centre will be in operation in the early part of 1964.

A commencement was also made on the preparation of plans for a residential hostel wing for mentally subnormal children under the age of 16 years. The hostel is planned to be erected on a site adjacent to the Day Training Centre.

VII.—TUBERCULOSIS

Incidence. In 1962, 49 persons were notified as suffering from pulmonary tuberculosis, 2 less than in the previous year. 10 cases of non-pulmonary tuberculosis were also notified during the year, 3 more than the previous year.

The total number of new cases was 74. This figure includes 15 cases added to the Register from other sources, e.g. Death Returns, etc. The total

number of new cases for the previous year was 66.

Mortality. 12 deaths in 1962 were due to tuberculosis, all being caused by the pulmonary form of the disease.

The death rate from tuberculosis was therefore 1.1 per 10,000 of the

population.

Table T.B.2. shows the incidence and death rate figures from 1943.

Table T.B.1.

Particulars of new cases and of deaths during 1962.

1			New	Cases		Deaths				
۱	Ages	Puln	nonary	Non-Pulmonary		Pulmonary		Non-Pulmonary		
		Males	Females	Males	Females	Males	Females	Males	Females	
	Under I year				_			_	_	
ı	5 —	1			_	_	_	_	_	
١	15 —	4	6	- 3	$-\frac{1}{2}$		_	_		
ı	45 —	16	6	2		3	1		_	
	15 —	10 4	1 -	<u>2</u>	_	4 2	1	_	_	
1	Totals	44	20	8	2	10	2		_	

Table T.B.2.

Number of cases notified and number of deaths each year, 1943 to 1962

	No. of Primary notifications received.			ths	Death Rate per 10,000 of population		
Year	Pulmonary	Non- Pulmonary	Pulmonary	Non- Pulmonary	Pulmonary	Non- Pulmonary	
1943 1944 1945 1946 1947 1948 1949 1950	107 94 81 101 111 98 96 104 87	24 27 25 24 10 15 16 16	64 48 58 48 68 63 58 46 33	12 12 13 4 9 7 7 7 4 8	6.4 4.9 5.8 4.6 6.4 5.7 5.2 4.1 3.0	1.2 1.3 0.4 0.9 0.6 0.6 0.3 0.7	
1952 1953 1954 1955 1956 1957 1958 1959 1960 1961 19 62	99 104 109 71 116 85 79 68 62 51 49	17 20 3 7 6 20 5 9 6 7	37 27 28 24 12 15 17 10 10 10	8 3 4 1 4 3 2 2 3 —	3.4 2.5 2.5 2.1 1.1 1.4 1.5 0.9 0.9 0.9	0.3 0.4 0.1 0.4 0.3 0.2 0.2 0.3 0.0 0.0	

Tuberculosis Dispensary and Chest Clinic. The administration and clinical work of the tuberculosis service is carried out at Bank House, Claughton Street, under the supervision of the Area Chest Physician appointed by the Liverpool Regional Hospital Board. This officer is responsible to the Local Authority for work under that part of Section 28 of the National Health Service Act, 1946, which deals with the care and after-care of patients suffering from tuberculosis. The Welfare Officer, who is wholly employed by the Local Authority, occupies an office at the dispensary. Close liaison is therefore possible between the work of the Regional Board and that of the Local Authority.

During 1962, the following attendances were made at the Dispensary:—

Tuberculous cases and conta	icts .	 	 2,867
Other chest conditions		 	 2,534

Particulars of St. Helens cases on the Dispensary Register are set out in Table T.B.3.

Table T.B.3.

Register of St. Helens cases of Tuberculosis during 1962.

	Pulmonary	Non- Pulmonary
1. No. of cases on Tuberculosis Register on 1/1/1962	942	122
No. of cases added to the Register during 1962— (i) Formal Notifications	49	10
from other sources— (a) From Local Death Returns	13	_
(b) From Registrar General's Death Returns (transferable deaths)		
(c) Posthumous Notifications (d) Transfers from other areas	5	
(e) Other sources	7	4
(b) Deaths— (i) Certified as due to Tuberculosis	12 5	-
(c) Transferred to other areas, lost sight of, or otherwise deleted from Register	35 956	3 124

Institutional Treatment. 81 patients from St. Helens were admitted to Eccleston Hall for treatment during the year 1952. There were 6 in-patient deaths of St. Helens cases during the twelve months.

VIII.—PREVENTION OF ILLNESS, CARE AND AFTER-CARE

Four meetings of the Care and After-Care Sub-Committee were held during the year. The Sub-Committee consists of the following:—

5 Members of the Health Committee.

One representative from each of the following bodies:

The National Assistance Board

The Ministry of Labour and National Service.

The British Legion.

The Soldiers', Sailors' and Airmen's Families Association.

As in previous years the specialised knowledge of the co-opted members proved of great assistance in the work of the Committee. The work during the year was concerned with the welfare and assistance of both tuberculous and non-tuberculous patients.

Provision of milk as extra nourishment. The scheme for the provision of additional milk which was started in 1950 was continued during the year. Eligibility for issue in each case was approved by the Chest Physician. A remission of charges was made according to a scale approved by the local authority. 20 patients received milk during the year, of whom 7 were new cases and 13 old cases. Each case was supplied with a pint of milk daily for periods varying from 4 to 12 weeks.

Provision of Nursing Requisites. As approved by the Health Committee, various articles of nursing requisites are available, e.g. air rings, urinals, bed pans, rubber sheetings, bed rests, commodes, bed cradles, beds, mattresses, etc. These articles are issued on loan in accordance with charges approved by the Health Committee.

The number of patients using the Nursing Equipment Loan Service during the year was 357. The total fees collected during the year was £31 19s. 6d.

During the year many gifts were received for use in the After-Care Service, including beds complete with mattresses, settees and chairs.

Nursing equipment was supplied on loan to 5 cases of paraplegia being nursed at home following discharge from Orthopaedic Hospitals.

Three old-age pensioners on discharge from hospital and unable to get upstairs were supplied for temporary periods with single beds, complete with dunlopillo mattresses, free of charge.

Home Shelters. Home shelters are available for loan to tuberculous patients. Lighting and heating installation is provided by the Local Authority but the cost of current consumed is borne by the patient.

COLONIZATION—Provision is made for the maintenance and training of selected cases in tuberculosis colonies.

Convalescent Treatment

(a) Tuberculous Patients

Several applications were made on behalf of tuberculous patients (non-infectious) for convalescent treatment. They were admitted to Convalescent Homes for periods varying from 2-3 weeks.

One patient was admitted to St. Annes-on-Sea Convalescent Home for a period of two weeks, expenses being paid by a local firm by whom he had been employed.

(b) Non-Tuberculous Patients

Application was made on behalf of two non-tuberculous female patients and two non-tuberculous male patients to the St. Helens and District Nursing Association for convalescent treatment. The females were each admitted to the Lear Home of Recovery, Hoylake, for a two week period, the male patients being admitted each for two weeks to the Blackburn and District Convalescent Home, St. Annes-on-Sea.

Two male patients were admitted for a period of two weeks to the Miners' Home, Blackpool.

One war disability pensioner was admitted for a period of convalescence to the Broughton House Convalescent Home.

Application for convalescent treatment was made on behalf of seven children between the ages of three and fourteen referred by the School Medical Officer to the Ormskirk Children's Hospital. These children were admitted for periods varying from two weeks to three months.

Application was made on behalf of three boys, aged 7, 5 and 4 years, whose mother was admitted to Eccleston Hall Hospital, for admission to Knolle Park Convent, Liverpool. They were admitted for an indefinite period, financial aid being given by the Liverpool Catholic Children's Protection Society.

One cancer patient was admitted to the Marie Curie Memorial Hospital, Woolton.

One patient was admitted to St. Annes-on-Sea Convalescent Home for a period of two weeks, expenses being paid by a local firm by whom he was employed.

Occupational Therapy

Under section 28 of the National Health Service Act, the Local Authority operate a scheme for domiciliary occupational therapy for tuberculous and non-tuberculous patients.

In the absence of a Handicrafts Instructor the work is undertaken by the Welfare Officer and there has been considerable expansion of this Service. Informal handicraft classes are held at the Chest Clinic and home training has also been undertaken. The schedule of handicrafts includes leather work, rugmaking, embroidery, knitting, woodwork, basketry and the making of lampshades, soft toys, and artificial jewellery, etc. Samples of completed work are on view throughout the year at the Chest Clinic.

During the year many patients have used this service and various articles have been purchased to the value of £693. 16s. 2d.

Initial free issues (varying from 5/- to 10/-) totalling £2. 1s. 9d. have been made to five patients.

Without doubt the provision of this scheme has been much appreciated by the patients and has helped very considerably in their recovery and ultimate resettlement in employment.

Welfare. During the year the Welfare Officer advised and assisted patients and their relatives attending the Chest Clinic and regular visits were paid to Eccleston Hall Hospital in order to help in-patients with personal problems. Home visits were made to both tuberculous and non-tuberculous patients.

The following is a summary of the visits paid by the Welfare Officer:

Visits to tuberculous patients	••••			••••	128
Visits to non-tuberculous patients		••••		••••	211
Visits to Eccleston Hall Hospital	••••		••••	••••	42
	Tota	1			381

There were 644 office interviews.

Close contact was maintained as in previous years with other statutory bodies and voluntary organisations. Some examples of this work are given below.

Statutory Bodies

During the year, 7 families (in which one or more members were suffering from tuberculosis) were included on the tuberculous patients housing list as being in need of re-housing. This figure includes some families who were already on the Corporation's list for re-housing.

The Housing Committee again agreed to the allocation of 24 houses per annum for the priority housing of cases suffering from tuberculosis. Details of the position in 1962 are given below:—

Tuberculous patients on the housing list of the Local Authority,

1/1/62	••••	••••	••••	3							
New cases added to list	••••	••••		4							
Allocations of Council houses		••••	••••	2							
Number of patients finding their own accommodation 1											
Total on Tuberculosis Housing List—31/12/62	••••			4							

It is very satisfactory to note that with the co-operation of the Council's Housing Committee, it has been possible over a number of years to make regular and substantial allocation of council houses to tuberculous patients in need of improved housing. At the 31st December, 1962, only 4 tuberculous families were awaiting the allocation of council houses. It must be emphasised that the change of environment and improved housing facilities provided under this scheme does much for the improvement of both the physical and mental health of tuberculous cases.

An application was made to the Housing Department on behalf of a tuberculous patient for an exchange from his prefabricated dwelling to a more suitable brick house. An application was made to the Housing Department on behalf of a patient suffering from bronchitis and emphysema for an exchange of a terraced house to a downstairs flat, agreement to re-let having been obtained from the private landlord. In each case suitable exchanges were granted.

Ministry of Labour. As in previous years the co-operation between the Chest Clinic staff and the Disablement Rehabilitation Officers (male and female) proved very successful.

14 male and 2 female patients were added to the Disablement Register during the year.

3 male tuberculous patients were placed in employment during the year. Periodic meetings have been held between the Disablement Resettlement Officers, Chest Physician and Welfare Officer for the purpose of discussing types of work suitable for tuberculous patients fit for employment.

Training Courses for Patients. Arrangements are made through the Ministry of Labour and National Service for the industrial rehabilitation and vocational training of selected cases of tuberculosis. Rehabilitation courses are of approximately 10 week periods, whilst Government training is from 6 to 12 months. The most popular subjects are motor repairing, joinery, cabinet making, shorthand and typewriting. The patients are eventually placed in employment with local firms.

National Assistance Board. Patients suffering a loss of income in order to undergo treatment for pulmonary tuberculosis and thus becoming eligible for the higher rate of allowance, were referred to the Board as a matter of routine. 23 such cases were referred during the year.

In addition "Exceptional Needs Grants" were made to tuberculous cases as follows:

Extra Nouris	hmen	t Gi	ants	•••••	•••••	•••••	*****	3 patients
Clothing								2 patients
Bedding			•••••			•••••	•••••	1 patient
Footwear	*****	•••••				•••••	*****	1 patient

Non-tuberculous patients were assisted as follows:—

Supplementary Allowances	 	14 patients
Footwear grant	 •••••	1 patient
Clothing grants	 •••••	3 patients
Grant towards cost of walking aid	 	1 patient

Throughout the year the National Assistance Board Officers gave all possible help to tuberculous and non-tuberculous patients, and co-operated closely with the Welfare Officer.

Ministry of Pensions and National Insurance. Close liaison was maintained with the officers of this Ministry in order to ensure that all possible facilities were available through these agencies to tuberculous and non-tuberculous patients.

Ministry of Health.—Applications were made to the Ministry of Health on behalf of 3 spastic children for provision of invalid wheel chairs, which were supplied.

Several applications were made also for provision of adult wheel chairs, both indoor and outdoor type, to arthritic patients.

In all these cases suitable chairs were provided.

Home Help Service.—During the year 1 case of tuberculosis and 4 non-tuberculous cases were referred to the Home Help Service.

Local Education Department—Clothing Grants.—Several cases of children of both tuberculous and non-tuberculous patients were referred for clothing and footwear grants and in each case the maximum allowance was given.

VOLUNTARY ORGANISATIONS

British Red Cross Society—Emergency Help Service.—The Emergency Help Service helped many pensioner patients with bedding, clothing and occupational therapy materials.

Other Voluntary Agencies

Help with bedding, clothing, grants, etc., was given by the following organisations:—

British Legion, Forces' Help Society, Royal Air Force Association, Royal Naval Benevolent Trust, S.S.A.F.A.

Special mention should be made of the kindness and willingness to help of all the local Branch Secretaries of these organisations.

Application was made on behalf of hospital patients to the Merseyside Hospitals Council for the in-patient grant.

Several patients were referred to the St. Helens Council of Social Service for advice.

Cancer Relief Fund. Application for assistance was made onbe half of seven patients to the Secretary of the Cancer Relief Fund. Life grants of 15/- per week were given in each case. In two cases additional grants of £10 each were made to cover cost of bedding and extra nourishment. In two other cases grants of £5 were made for clothing, and in one case a grant of £3. 15s. for clothing.

Marie Curie Memorial Foundation.—Of all the cases of Cancer being helped under the Care and After-Care Service, nine have, in addition, received help from the Marie Curie Memorial Foundation in the form of bedding and clothing and additional nourishment on medical recommendation. These cases are followed up and assistance given as required.

Chiropody Service.—Several cases were referred for chiropody treatment.

Meals on Wheels. Several cases were referred to the W.V.S. for provision of meals on wheels.

Dorcas Society.—Application was made on behalf of several patients for clothing and bedding, and in each case necessary clothing and bedding was provided.

VOLUNTARY FUND

During the year several members of the Care and After-Care Committee and other Welfare workers assisted the Welfare Officer and the Tuberculosis Health Visitor in maintaining a voluntary fund. This fund (The Home Patients' Voluntary Welfare Fund) is placed at the disposal of the Care and After-Care Sub-Committee to assist patients in ways outside the scope of the Local Authority in its statutory capacity. The fund derives its income from voluntary organised sales of work and from donations, etc. Invalid foods have been purchased at regular intervals and 26 food parcels have been distributed to necessitous non-pensioner and pensioner patients and their dependants. At Christmas 76 parcels of groceries were distributed, 22 to tuberculous families, 27 to non-tuberculous families, 26 to pensioners and one to a diabetic patient. Christmas presents were purchased and distributed to 18 children who were either patients themselves or whose parents were unable to work because of illness. Two other patients, a spastic and a paraplegic, each received gifts of £1. A donation of £5. 10. 0d. was given towards cost of a patient's convalescent holiday at St. Annes-on-Sea.

A donation of £2. 2s. 0d. was made to the Marie Curie Memorial Hospital, Woolton.

B.C.G. VACCINATION

The scheme for the vaccination of school children against tuberculosis was continued during 1962. Some 2,098 pupils were given the Heaf tuberculin test during the year. Of these, 111 failed to keep their second appointment and will be followed up when the vaccination team again visits the schools during the coming year. Of the remaining children, 609 were found to be positive to this test and therefore did not require vaccination. 28 of the remaining pupils were found to be unsuitable for vaccination on medical grounds, which meant that 1,461 pupils were vaccinated with B.C.G. vaccine.

Pupils who were found to be strongly positive to the Heaf tuberculin tests were referred to the Chest Clinic for further investigation. In the majority of these cases it was found that there was a history of contact with a known case of tuberculosis, usually a member of the family.

The 609 pupils found to be positive to the tuberculin test during the year gives a tuberculin positive rate of 29.02%. This compares with a tuberculin positive rate of 29.75% in the year 1961, and a rate of 29.7% for 1960. This consistently high figure was a constant source of worry during the year. Excellent liaison was maintained between the B.C.G. vaccination teams and the Mass Miniature Radiography Unit, which visited a number of schools during the year at the request of the Medical Officer of Health to X-Ray positive reactors and members of the school staff. The high percentage of positive reactors noted during 1962 was influenced to a considerable extent by a high positive rate ascertained in one of the largest girls' schools in the town. The notification

of an active case of tuberculosis amongst the pupils at this school was responsible for an intensive investigation to discover the source of tuberculous infection in the school. As a result of this investigation, two further cases of active pulmonary tuberculosis amongst the pupils was diagnosed. Particulars of these investigations have been the subject of a detailed report in the School Medical Officer's report for 1962. It is hoped that as a result of the intensive effort made during the year, tuberculous infection in the schools has been eradicated and the improved situation will manifest itself in a decrease in the tuberculin positive rate during 1963.

CHIROPODY SERVICE

This was the first complete year of the running of the Chiropody Service by the Health Department. The project provides treatment for persons aged 65 years and over, and in the year under review there was a steady expansion of the scheme. An assessment of the position during 1962 finally revealed that the service was meeting all the demands of the aged people in the community.

Arrangements were made in February 1962 for residents of the Sutton area to register at Elizabeth Street clinic for chiropody treatment, thus saving them a visit to the central clinic. This scheme of district registration will be extended to cover all areas. A further report was made to the Health Committee and a decision was undertaken to expand the service to include expectant mothers.

Treatment services have, until the present, been carried out on an individual basis in the surgeries of local chiropodists who were registered for the purpose with the Local Health Authority. It was felt that this type of treatment might be unsuitable for expectant mothers, and as a result the Health Committee, in agreement with the local chiropodists, decided to establish and equip a chiropody clinic situated in Bickerstaffe Street at which treatments will be given on a sessional basis to expectant mothers. Plans were, therefore, proceeded with for the furnishing and equipping of this clinic.

The number of treatments given from the 1st January 1962 to the 31st December 1962 was as follows:

CHIROPODY TREATMENTS, 1962.

			Surgery	Domiciliary 190	Total
January	*****		577	18	595
February	•••••	•••••	483	17	500
March		*****	579	23	602
April		*****	569	26	595
May	•••••		692	29	721
June		•••••	540	24	564
July	•••••	•••••	647	29	676
August		•••••	599	24	623
September			538	27	565
October		*****	658	26	684
November			611	24	635
December	•••••	*****	462	27	489
		(6,955	294	7,249

IX—VENEREAL DISEASES

The St. Helens Special Treatment Centre is under the administration of the Liverpool Regional Hospital Board, but the centre continues to be staffed by male and female nurses provided by the Corporation under agency agreements.

The following statement shows the number of cases dealt with at the Centre during the year 1962, in comparison with the previous year. This includes cases from outside the Borough who may receive treatment at the St. Helens Centre.

Table V.D.1

	1961		1962	
	M	F	M	F
1. No. of cases under treatment or observation on lst January	35	36	36	36
removed from the register who returned for further observation or treatment) and Transfers 3. No. of cases discharged after completion of treat-	148	49	146	59
ment or transferred to other centres or ceased to attend	147	49	155	69
vation on 31st December 5. No. of attendances:—	36	36	27	26
(a) For consultation or treatment by Medical Officers	791 182	304 8	546 56	274

Table V.D.2 shows the number of cases of definite venereal disease treated for the first time at the Centre during each of the past ten years. This table excludes cases which had received treatment previously at other Centres, and also cases removed from the register in previous years who returned for treatment or observation for the same infection.

Table V.D.2

Number of new cases of Venereal Diseases dealt with during 10 years, 1953 to 1962:

V	Syphilis		Soft C	Soft Chancre		Gonorrhoea		
Year	M	F	M	F	M	F	Total	
1953 1954 1955 1956 1957 1958 1959 1960 1961 1962	4 3 3 2 4 2 2 -	7 2 4 2 5 6 —	1 1 - 1 - -		20 10 16 14 18 14 20 20 31 24	9 2 2 9 8 7 5 7 20 15	41 17 26 27 36 29 27 27 53 40	

The following table V.D.3 gives a summary of the services rendered at the treatment centre during the year, showing the areas in which the patients resided.

Tabl	IA	J.D	3
Lavi	•	0.3.1	•

Name of County, County Borough, etc.		Syphilis	Gonorrhoea	Other Conditions	Total
St. Helens Liverpool	•••••	1	32 6 1	129 33 1	161 40 2
Total		1	39	163	203

Contact Tracing

During the year the welfare arrangements in connection with the Special Treatment Clinic were carried on as in previous years. The attendant at the male clinic was responsible for the tracing of contacts and for the follow-up of defaulters in conjunction with the Department's Welfare Officer of the Care and After-Care Service who carried out the work for the female clinic.

Contacts can only be traced if they are known to the patient or if enough information is given to the attendant, or Welfare Officer, to enable them to trace the source of the infection, but in the last year 65% of the cases seen at the clinic were infected by "Pick-ups", either in the Borough or in other parts of the country.

Gonorrhoea in Young People

Because of the national concern at the rising figures of gonorrhoea in teenagers, it may be of interest to point out that of the 24 male patients and 15 female patients found to be suffering from this disease during the year, 2 of the males and 6 of the females were between the ages of 14 and 19 years.

The ages of the male cases were 16 and 18 respectively. Of the females, one was 14 years of age and still attending school. In this case the parents were informed of the girl's condition.

X-MATERNITY AND CHILD WELFARE

Care of Mothers and Young Children

NOTIFICATION OF BIRTHS.—Under Section 203 of the Public Health Act, 1936, 1,960 live births and 41 still-births were notified during 1962. The corresponding figures for 1961 were 1,925 live births and 51 still-births.

The total number of live births registered as belonging to St. Helens was 1,979, giving a birth rate of 18.3 per 1,000 of the population for the year 1962. The corresponding rates over the past 5 years were respectively 17.2 in 1957, 16.9 in 1958, 17.1 in 1959, 17.5 in 1960 and 17.6 in 1961.

INFANT MORTALITY.—During 1962 the deaths occurred of 44 infants under the age of one year, giving an Infantile Mortality Rate for that year of 22.2 per 1,000 live births. The corresponding rates during the preceding five years were 31.0 in 1957, 35.8 in 1958, 24.3 in 1959, 39.2 in 1960 and 28.3 in 1961. The average for the five years 1958-1962 was 31.7. The Infantile Mortality Rate for England and Wales for 1962 was 21.4 per 1,000 births.

Table M.C.W.1 below shows the ages at death and causes of death in these infants. It will be noted that 29 of the infants died before the age of one month (the neo-natal period), 5 died between 1 and 3 months, 8 died between 3 and 6 months, 1 died between 6 and 9 months, and 1 died between 9 and 12 months.

By far the greater number of deaths, therefore, occurred within the first three months. The following tables present a statistical review of the deaths with remarks on the apparent causal factors.

Table M.C.W.1

		Causes of Death						
Ages at which death occurred	Congenital	Prematurity	Pneumonia	Infection	Accidents	Other Causes	Total	
Birth to 24 hours	1	5	_			4	10	
1 day to 7 days	3	5	1	_	_	2	11	
8 days to 1 month	5		2	1	—	_	8	
1 month to 3 months	1	_	3		1		5	
3 months to 6 months	4		2	2	—	—	8	
6 months to 9 months	_	_	1		_	_	1	
9 months to 12 months			-	1	—		1	
ALL AGES	14	10	9	4	1	6	44	

The infantile mortality rate of 22.2 per 1,000 live births again shows a very satisfactory decrease on the rate of 28.3 which was recorded in 1961. This rate of 22.2 per 1,000 live births is the lowest infantile morality rate ever recorded for St. Helens, and compares favourably with the rate for England and Wales. The decrease in numbers is due to a diminution of the number of deaths due primarily to prematurity, and those due to infection. It must be pointed out, however, that although the actual number of infant deaths caused by prematurity alone was lowered from 16 in 1961 to 10 in 1962, 17 premature babies died during 1962—the remaining 7 deaths being due to Bronchiolitis 1, Pneumonia 3, and Congenital deformity 3. There is still, therefore, an urgent need for improved accommodation in the area for the treatment of premature infants.

The following Table M.C.W.2 shows the time of the year at which the various deaths occurred.

Table M.C.W.2.

Month when death occurred of children under one year.

		Causes of Death							
Month during 1962 when death occurred	Congenital	Prematurity	Pneumonia	Infection	Accidents	Other Causes	Total		
January	1		1				2		
February	_	garbanisma	3	_	1	1	5		
March	1	1	3	2	_	(00474779	7		
April	1	1			-	_	2		
May	2	2	_	1	_	1	6		
June	2		_		4	1	3		
July	_	1	1 _		_	_	2		
August	1		_	_		_	1		
September	3	1		1		1	6		
October	1	3	_		_	_	4		
November	_	_	_	_		1	1		
December	2	1	1			1	5		
TOTAL	14	10	9	4	1	6	44		

The 4 deaths due to Infection (other than Pneumonia) were caused by Gastro Enteritis 2, Bronchiolitis 1, and Pneumococcal Meningitis 1.

The 6 deaths due to other causes were as follows:—Atelectasis 3, Inattention at Birth 1, Cerebral Haemorrhage 1 and Asphyxia Livida 1.

The 17 deaths of premature infants were specially investigated. Table M.C.W.3 shows the birth weights of these infants, the periods of pregnancy at which these premature births occurred and the causes of the prematurity. (An infant of 5½lb. or less at birth is classed as a premature birth for the purpose of the following table.)

Table M.C.W. 3

Analysis of Deaths of Premature Infants

(a) Weights at Birth of Premature Infants

Less than 2 lb. 3 oz	•••••	1
2 lb. 3 oz. to 3 lb. 4 oz	•••••	5
3 lb. 4 oz. to 4 lb. 6 oz	•••••	6
4 lb. 6 oz. to 4 lb. 15 oz	•••••	2
4 lb. 15 oz. to 5 lb. 8 oz		3
Total	- 1	17
Total	*****	1 /

(b) Periods of pregnancy at which premature births occurred (i.e. $5\frac{1}{2}$ lb. or less at birth)

Period of pregnancy:

26 weeks	•••••		• • • • • •	•••••		2
28 weeks					•••••	3
30 weeks	*****	•••••	•••••			1
32 weeks		•••••	•••••			1
33 weeks	•••••			*****		_
34 weeks	•••••		•••••			_
36 weeks				*****		6
37 weeks			•••••	*****	•••••	1
38 weeks			•••••	*****		1
39 weeks	*****		*****		•••••	2
		Γ	otal			17

(c) Causes of Prematurity

Toxaemia of Pregna	ncy		•••••	5
Ante-Partum Haeme	orrha	.ge	*****	3
Twin Pregnancy	*****	*****	*****	4
No apparent cause	•••••	•••••	*****	5
				17

(17 premature infants died during the year, 10 deaths being due to Prematurity, 1 to Bronchiolitis, 3 to Pneumonia and 3 to Congenital Defects.)

The following table M.C.W. 4 shows the position regarding ante-natal care of mothers, and also shows whether the mothers were employed during pregnancy.

Table M.C.W.4.

Source of ante-natal care	Mothers working during pregnancy	Mothers not working during pregnancy
Midwife	2 2 3 5	4 15 8 5 —
TOTAL	12	32

STILL-BIRTHS.—The number of still-births registered as belonging to the Borough was 43. All still-births were investigated, and the causes of intrauterine deaths were attributable to the following conditions:

Prematurity						8
Toxaemia of Pregna						8
Rh. Negative		•••••	*****	*****	*****	2
1. 2	•••••	•••••			•••••	8
Spina Bifida					•••••	3
Breech Delivery						1
Diabetes				•••••	*****	2
Intra-uterine death	*****	*****		•••••		7
Prolapsed Cord	*****	•••••	•••••	•••••	*****	1
Cause not known					•••••	1
Impacted Shoulders						I
Prolonged Labour, l	Brow	Pres	senta	tion		1
•						

MATERNAL DEATHS—During 1962, 2 deaths were recorded by the Registrar General as resulting from childbirth or accidents of pregnancy.

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One of these deaths was due to Post-partum haemorrhage following Caesarean Section for a transverse presentation, and the other death resulted from Multiple abscesses of the lung following Septicaemia due to a natural abortion. The latter case was reported to the Coroner, who ordered a post-mortem examination, but no inquest was held.

In comparison, the maternal mortality rate for the preceding year was 0.0 per 1,000 live and still-births.

INFECTIOUS DISEASES IN MOTHERS AND CHILDREN

Puerperal Pyrexia.—4 cases of Puerperal Pyrexia were notified during the year, 3 cases occurring on the district and 1 in hospital. The cases confined at home were found to be suffering from Bronchiectasis, Pulmonary Embolism and Pyelitis. The patient delivered in hospital was diagnosed as Pyelo-nephritis.

Pemphigus.—No case was reported during the year.

Ophthalmia Neonatorum.—No cases were reported during the year.

Other Infectious Diseases.—The following Table, M.C.W.5., shows the number of cases of notifiable infectious diseases which occurred in children under 5 years of age, and the deaths resulting therefrom.

Table M.C.W.5.

	Unde	r 1 year	1-5 years		
	Cases	Deaths	Cases	Deaths	
Scarlet Fever	3		39		
Diphtheria	on route		Copins Plans		
Measles	20		252		
Whooping Cough	1		9		
Ophthalmia Neonatorum	_				
Meningococcal Infections	5	-	3		

CLINIC SERVICES

Child Welfare Clinics.—Clinics for children under 5 years of age are held on 9 sessions weekly at 8 centres.

Table M.C.W.6. shows attendances at the various Maternity and Child Welfare Clinics.

During the year, routine tests for the detection of phenylketonuria were conducted at Infant Welfare Clincs.

Immunisation against diphtheria is carried out at the Child Welfare Clinics as well as at the special sessions held at the School Clinic in Claughton Street, and at the outlying district clinics.

During the year, health education activities in the various clinics were augmented by a series of film shows on appropriate subjects, which were shown regularly at the Central and District Clinics.

In accordance with arrangements made with the Lancashire County Council, 73 infant welfare cases from the adjoining County area made 320 attendances at the Central or District clinics.

Ante-natal Clinics.—At the end of the year, ante-natal clinics were being held 9 times weekly at 8 centres.

Table M.C.W.6.

Attendances at Maternity and Child Welfare Clinics during 1962

Child Welfare Clinics. No. of children who attended for the first time during the year and who, on the date of their first attendance, were under 1 year of age		
(i) 1962	No. of children who attended for the first time during the year and who,	1407
(i) under 1 year of age	(i) 1962	966
Medical Officer's Sessions including Specialist Ante-Natal Clinics: No. of expectant mothers who attended	(i) under 1 year of age	
Midwives' Sessions (no medical officer being present):— No of expectant mothers who attended	Medical Officer's Sessions including Specialist Ante-Natal Clinics:— No. of expectant mothers who attended	
No. of mothers who attended 160 No. of attendances 168	Midwives' Sessions (no medical officer being present):— No of expectant mothers who attended	114
Gynaecological and Post-natal Clinic.	No. of mothers who attended	
No. of mothers who attended 241 No. of attendances		

Poliomyelitis vaccination of expectant mothers was continued during the year at the central immunisation clinic and also at the district ante-natal clinics.

Expectant mothers have routine blood tests carried out at these clinics. The tests are for blood grouping, Rhesus factor and Kahn reaction. During the year, 382 specimens were sent for examination. Of these, 244 were Rhesus positive, 134 were Rhesus negative, 4 Genotype reaction and 2 had a positive Kahn reaction.

Following customary routine, the patients with a positive Kahn reaction were subjected to a confirmatory Wasserman reaction. It was found that the Wasserman result was negative in both cases.

Of the 134 patients who were Rhesus Negative in type, only 10 had Rhesus Antibodies present. The importance of this test lies in the fact that the doctor in charge of the confinement is forewarned that the baby may need an exchange transfusion immediately after birth. Rhesus Negative blood may be obtained from the Regional Blood Transfusion Centre before the confinement, in readiness for either the mother or the baby. Of these 10 patients, 2 babies needed to have an exchange transfusion, and in both cases this was successful.

Routine Blood Counts and Haemoglobin estimations are carried out at all ante-natal clinics, the laboratory work in connection with this being conducted by the Pathologist at the St. Helens Hospital. In addition to the ante-natal clinics, a Specialist Clinic staffed by two specialist obstetricians attached to the Cowley Hill Maternity Hospital, is held fortnightly. Patients are referred for Consultant advice by Medical Officers of the Local Authority staffing the ordinary ante-natal clinics, and the work done has proved to be of great value. During 1962, 48 patients were referred to the Centre for Consultant opinion.

The Midwife's ante-natal session at Jersey Street Centre was continued during 1962. During the year, 114 patients made 510 attendances.

Arrangements have been operative for many years whereby ante-natal cases from the County districts adjoining St. Helens may attend any of the St. Helens ante-natal clinics for advice and treatment. During the year 174 such cases made a total of 813 attendances at one or other of the clinics.

GYNAECOLOGICAL AND POST-NATAL CLINIC.—This clinic is held once a week at the Hardshaw Street Centre and serves the double purpose of investigation of gynaecological conditions associated with pregnancy and as a clinic for post-natal supervision. During 1962, 226 patients visited this clinic for post-natal examinations. Post-natal supervision is, however, also carried out at the Infant Welfare and Ante-Natal Clinics held in the outlying districts. The total number of women who received special post-natal supervision was 401.

The number of gynaecological patients attending this clinic was 15 (35 attendances).

Patients who needed operative treatment were referred to the outpatient departments of the local hospitals.

At this clinic patients may also receive advice on birth control methods when such is desirable for medical reasons. The following statement indicates the number of patients to whom such advice was given, and the reasons:

Severe debility caused by frequent pregnancies								8
Pulmonary Tubercul	osis						*****	1
Mental Instability		•••••		•••••	•••••		•••••	3
Hemiplegia								2
Severe Asthma			•••••		•••••		•••••	1
Severe Anaemia	•••••				•••••		•••••	1
								1.0
								16

Two of the patients attending the Gynaecological Clinic in 1962 were found to be pregnant and referred to the Ante-Natal Clinic.

In addition to the above, in accordance with long-standing arrangements, 18 cases from adjoining County districts made 25 attendances at the above clinic.

DISTRIBUTION OF WELFARE FOODS

(a) National Welfare Foods Scheme.

The scheme for the distribution of national welfare foods was continued without alteration during 1962.

From 1st June, 1961, the prices of Welfare Foods were increased as follows:—

	From	To
Orange Juice	5d.	1/6d. per bottle
Cod Liver Oil	Nil	1/- per bottle
Vitamin Tablets	Nil	6d. per packet

The following table gives particulars of the uptake in dried milk, orange juice and vitamin supplements since 1960.

	Dried Milk	Orange Juice	C.L.O.	Vitamin Tablets
1960	27,569	53,603	6,622	5,809
1961	21,190	29,688	4,072	4,236
1962	17,016	17,597	2,399	3,036

Table M.C.W.7.

Receipts and issues of welfare foods for the period 31st December, 1961, to 29th December, 1962.

	National Dried Milk	Orange Juice	Cod Liver Oil	Vitamin Tablets
1. Stocks received from Ministry of Food (a) In Hand on 1/1/62 (b) Received during the period	1688 17217	1345 18000	195 2556	202 3340
Total	18905	19345	2751	3542
2. Disposal of Stocks: (a) Issued against coupons— (i) paid for by postage stamps (ii) paid for by cash (iii) free	13231 1809 1967	15737 1608	— 1896 503 —	2975 61 —
Issues to public (c) Other Issues	17007 9	17345 252	2399 —	3036
Total Issues	17016	17597	2399	3036
3. Returned to Ministry of Food, Damaged, etc	73	62		2
4. Stocks in Hand 29/12/62	1816	1686	352	504

The issues of welfare foods from the various distribution centres during the period 31st December, 1961, to 29th December, 1962, are shown in Table M.C.W.8. Receipts during this period amounted to £3,286. 9s. 4d. cash.

TABLE M.C.W.8.

Issues of Welfare Foods to the public from the various Distribution Centres 1962

Distribution Centre	National Dried Milk	Orange Juice	Cod Liver Oil	Vitamin Tablets
Welfare Foods Centre	13114	9439	1177	1685
Albion Street Clinic	1193	1435	260	262
Blackbrook Clinic	297	369	168	75
Elizabeth Street Clinic	720	1147	123	192
Hardshaw Street Clinic	87	1102	81	367
Carr Mill Clinic	103	964	130	67
Jersey Street Clinic	287	414	86	73
Lacey Street Clinic	556	1686	236	180
Nunn Street Clinic	650	789	138	135
GRAND TOTAL	17007	17345	2399	3036

(b) Other Welfare Foods. The issue of proprietary brands of dried milk through the Council's scheme for mothers and infants was limited to special cases for whom the National Dried Milk was not altogether satisfactory. During 1962, approximately 17,911 lbs. of dried milk were distributed through the Council's Scheme.

DENTAL TREATMENT

Table M.C.W.9.

(a) Numbers provided with Dental Care.

	Examined	Needing treatment	Treated	Made dentally fit
Expectant and Nursing Mothers	207	190	143	83
Children under five	67	65	65	65

(b) Forms of Dental Treatment Provided:

	Scalings & Gum	Fillings	Silver Nitrate	Crowns		General	Upper or Dent Prov	ures	Radio-
	Treat- ment		or Inlays	Extrac- tions	Anaes- thetics	Full	Partial	graphs	
Expectant and Nursing Mothers	3					544	49	18	3
Children under 5	_					145			

The removal of charges for the supply of dentures by private practitioners to expectant and nursing mothers caused a slight drop in the attendances at the Dental Clinic. The work done, however, remained quite considerable and although a larger proportion of the cases were those of dental emergencies, it was possible to carry out a great deal of conservative work and to foster the principles of preventive dental hygiene in the expectant mothers.

MINOR AILMENTS.—During 1962, 6 children were referred to and received treatment at one or other of the Council's Minor Ailments Clinics.

CRIPPLED CHILDREN.—Crippling defects in children under 5 years of age are dealt with under the Council's Orthopaedic Scheme, which provides periodic supervision by the Consultant Orthopaedic Surgeon and the Physiotherapist.

During 1962, 118 infant welfare cases were dealt with at the Orthopaedic Clinic.

DAY NURSERY.—This nursery is open from 6.30 a.m. to 7 p.m. Monday to Friday. Accommodation is limited to children whose mothers are working, and vacancies are allocated in the first place to essential priority groups, consisting of unmarried mothers, widows compelled to go to work, wives of chronically sick husbands and wives separated from husbands or divorced. Any vacancies remaining following placings from the essential priority list are then allocated to wives under hardship owing to temporary illness of the wage earner, women in nursing or domestic employment in local hospitals and women in certain essential services such as public transport.

There were mild outbreaks of German Measles, Measles and Mumps during the months of February, April, May and November, as well as colds in the head and colds on the chest during the winter months.

Particulars of attendances &c. at the Hall Street Day Nursery during 1962 are shown below:—

	oved places Nursery	register at th			ge daily attendance uring the year		
0-2 years	2-5 years	0-2 years	2-5 years	0-2 years	2-5 years		
14	16	7	25	7.2	15.0		

THE CARE OF PREMATURE INFANTS.—Since 1944 special efforts have been directed towards preserving life in premature and/or immature infants. The birth weight is stated on every notification of birth form, and in those cases born at home where the birth weight was 5 lbs. 8 ozs. or less a special visit was immediately made by the Supervisor of Midwives, and, if necessary, arrangements made for admission to hospital. For infants remaining at home, special basket cots fitted with special lining, mattress and bedding, a Belcroy feeding bottle and hot water bottles are available, and have proved of value.

During 1962, 53 premature and/or immature babies were born at home and a further 98 were born in hospital. Particulars of these cases are given in Table M.C.W.10.

When these infants are discharged from hospital, or when the midwife has ceased to attend to those born at home, the Health Visitor concerned is immediately notified and pays special follow-up visits.

THE CARE OF UNMARRIED MOTHERS.—As in previous years, special consideration was given to the care of the unmarried mother and her child, and arrangements were made for admission of cases to St. Monica's Home, Liverpool, and the Mater Dei Home, Blundellsands, and to other appropriate homes. All cases of unmarried expectant mothers coming to the knowledge of the Department through Health Visitors, Municipal Midwives, Moral Welfare Workers and other agencies, are notified to the Medical Officer in charge of Maternity and Child Welfare Services, who, after investigation, decides which cases can be dealt with at home or through local hospitals, and which cases can most suitably be dealt with by periods of residence in suitable Homes. The mother is admitted to the Home about two months before the expected confinement and remains there after confinement until suitable arrangements can be made for the after-care of herself and the child. During 1962, 56 unmarried mothers were assisted under these arrangements.

In the majority of cases it was found that the parents were willing to keep the girl at home during the pregnancy if some arrangements could be made for the confinement.

The following list gives the places of confinement:—

Cowley Hill Maternity Hospital		••••	••••	••••	••••	••••	11
Whiston Hospital, Prescot	••••	••••	••••	••••	••••	••••	23
Parents' homes		••••	••••		••••	••••	5
Diocesan or other Voluntary Homes	••••	••••	••••	••••	••••	••••	15
Undelivered at 31.12.62						•••••	2
			т	'atal			56
			1	otai	*****	••••	56

Mothers entering Homes are assisted by the Corporation in the payment of their fees. All the unmarried mothers were helped to take out Affiliation Orders.

Every effort was made in all cases to enable the mother to keep the child with her in the parental home, and in many cases these efforts were successful.

Table M.C.W.10.

PREMATURE AND/OR IMMATURE BABIES, 1962.

		Nursing d Trans- Hospital pefore	Survived 28 days			l	.	
		in an to or b	Died within 24 hrs of birth				1	
		Born Home ferred on	Total		1		ļ	ļ
		sing ursed ere	Sur- vived 28 days	I	l			
		Born in Nursing Home and Nursed entirely there	Died within 24 hrs of birth	l	l	1	l	
	962.	Born Home enti	Total	1				
	IMMATURE BABIES, 1962.	me red on or day	Survived 28 days		2	2	П	9
.10.	RE BAH	Born at Home and transferred to Hospital on or before 28th day	Died within 24 hrs of birth	-	1	1	1	1
M.C.W.10.	MATU	Born and to Ho befor	Total	2	æ	2	1	8
Table N		ome ed Iome	Sur- vived 28 days		11	es .	25	39
Ī	AND/	Born at Home and Nursed entirely at Home	Died within 24 hrs of birth	1	-	1	2	3
	PREMATURE AND/OR	Bor an entire	Total	1	13	4	28	45
	PREM	pital	Sur- vived 28 days	2	19	25	43	68
		Born in Hospital	Died within 24 hrs of birth	ν,	2			7
		Вогп	Total	7	23	25	43	86
	WEIGHT AT			3 lb. 4 oz. or less	Over 3 lb. 4 oz. up to and including 4lb. 6 oz.	Over 4 lb. 6 oz. up to and including 4lb. 15oz.	Over 4 lb. 15 oz. up to and including 5lb. 8oz.	Totals

The following is a summary of the disposal of the children born during the year:—

Cared for by grandparen	ts while	moth	er goes	to w	ork		11
Cared for by mother		••••		••••			17
Seeking adoption				••••	••••		4
Adopted	•••		•••				8
Parents married later				••••		••••	10
Died						•••••	1
With Foster-Parents						•••••	1
Removed out of Borough	h			₻	*****	•••••	2
				То	tal		54

HOSPITAL ACCOMMODATION.—The Cowley Hill Maternity Hospital, administered by the St. Helens and District Hospital Management Committee, is the only Maternity Hospital in St. Helens and has a complement of 50 beds, which includes a 17-bed General Practitioner unit.

Throughout the year patients booked for the Cowley Hill Maternity Hospital at the Council's Ante-Natal Clinics and also at the Ante-Natal Clinics at the Hospital. When accommodation at the Cowley Hill Maternity Hospital is not available, St. Helens patients are referred to Whiston Hospital. Emergency cases are admitted to Cowley Hill Maternity Hospital when beds are available. Patients are booked for hospital confinement when they come into one of the following classes:—

Abnormal obstetrical cases
Multiparity
Unsuitable home conditions
Primigravidae

When a woman is recommended for hospital confinement on social grounds and applies to her district clinic for a hospital bed, a report is requested from the district midwife regarding the suitability of the home for confinement. The health visitor of the district is also asked to report on the general family conditions, the amount of help available, the type of work on which the husband is engaged, and any other relevant matter, so that the medical officer in charge of the hospital bookings may assess the case. When a hospital bed cannot be granted, the midwife or health visitor visits the patient and advises the use of the Home Help Service in appropriate cases, the use of maternity outfits, and on the general working of the Domiciliary Midwifery Service.

During 1962, 1,247 births (881 being St. Helens cases) took place in the Cowley Hill Maternity Hospital, 475 St. Helens births in the Whiston Hospital, Prescot, and 16 St. Helens births occurred in other hospitals.

XI.—MIDWIFERY SERVICE.

MUNICIPAL MIDWIFERY SERVICE.—The staff establishment of the Municipal Midwifery Service is fifteen District Midwives and one Non-Medical Supervisor of Midwives. At the end of the year there was a staff deficiency of 4 District Midwives. The midwives work from their own homes and are grouped in districts to allow for relief duties. The following table gives a summary of the work done by the staff of the Municipal Midwifery Service during 1962.

Number of cases attended:—

as midwife				510			
as maternity nurse	•••••	•••••	•••••	74			
	Tota	al		584			
Number of live births	•••••		•••••	586			
Number of still-births		•••••	•••••	9			
Number of abortions							
Number of cases in which midwife sent for medical							
assistance				141			
Supervisor's visits and inspections		•••••	•••••	335			

During the year Gas and Air Analgesia was given to 305 patients, i.e. 51.2% of the total number of live and still-births. All the domiciliary midwives are qualified to administer Gas and Air Analgesia, and for their use, seven portable sets of Minnitt's Gas and Air Analgesia Apparatus are kept at the Central Ambulance Depot, and are despatched from that depot to the patients' homes by car immediately on request by the Midwives. The use of this analgesia is being urged and encouraged in the service.

Domiciliary midwives are trained in the use of Pethidine during confinement, and they are all issued with this sedative and analgesic drug for use in their practices. During the year this drug was administered to 370 patients. Pethidine in the early stage of labour, and Gas and Air Analgesia have been found most beneficial in helping to alleviate the suffering of childbirth. During 1962, 2 midwives attended refresher courses.

During 1962, by arrangement with the Local Management Committee, eleven pupil midwives were trained in this work by domiciliary midwives. Out of this number, ten were successful in their final examination.

The number of cases attended by the staff of the Municipal Midwifery Service represents 29% of the total notifications of births in the Borough. The majority of these mothers wished to have their confinements at home, their homes were suitable for a confinement to take place there, and the patients were appreciative of the services provided for them by the Municipal Midwifery Service.

Pilot schemes had been introduced in the previous years for the introduction of Trilene anaesthesia. The results were found to be universally successful, and the portability of the apparatus certainly made it popular with those midwives by whom it was employed. During 1962, therefore, a decision was made to equip all teaching midwives with Trilene apparatus with enough spare sets to allow other midwives to offer the alternative of Trilene or Gas and Air on individual preference.

One midwife appointed at the end of 1961 commenced duty in January 1962. Another midwife resigned to take a post in Liverpool in June 1962, so that the number of midwives on the staff at the end of the year was 11. This number means that there is a staff deficiency of 4.

The midwives are on call day and night, and their off-duty times are arranged in accordance with the suggestions laid down by the Whitley Council. These are: 1 day off each week from 5 p.m. on the day preceding the day off until 9 a.m. on the day following the day off. Every fourth week each midwife is off duty from 9 a.m. on Friday until 9 a.m. the following Tuesday. The Friday of this week-end is the day off for that week, and the Monday is the day off for the next week. From January 1962, the midwives off duty was increased by $1\frac{1}{2}$ days per month, making a total of $8\frac{1}{2}$ days per month instead of 7 days in previous years. Should any one midwife have a particularly heavy period of duty, the Supervisor arranges some relief from other midwives in the Service who are not so busy. A night rota system was reviewed during the year, but the midwives themselves again rejected this scheme and preferred to carry on with the existing arrangements in the Service.

MATERNITY CASES ATTENDED BY MIDWIVES.—The following table shows the extent of the work carried out by the various classes of midwives in St. Helens during 1962.

Table M.C.W.11.

Number of Maternity Cases in the Area of the Local Supervising Authority attended by Midwives during 1962.

		As Midwives	As Maternity Nurses
(a)	Domiciliary Midwives. Midwives employed by the Authority	510	74
	Midwives in Private Practice		_
(b)	Midwives in Institutions. Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act.	1110	164
	Midwives in Private Practice	_	

INSPECTION OF MIDWIVES.—During 1962, 35 midwives notified their intention to practise within the Borough. At the end of the year, 31 of these midwives were still practising within the Borough, and of these 12 were employed by the Local Health Authority, and 19 were engaged at the Cowley Hill Maternity Hospital.

The supervision and inspection of midwives is carried out by Medical Officers and by the Non-Medical Supervisor of Midwives. During 1962, 106 visits were made to the Council's midwives.

XII.—HEALTH VISITING

The work of the Health Visitors continues to attain a satisfactory standard of efficiency in spite of a continued shortage of staff. Special emphasis on Health Education of the mothers attending the ante-natal and infant welfare centres was again one of the main objectives at the clinics. These educational talks to the mothers will mean that extra demonstration equipment will become increasingly necessary at all clinics.

Co-operation between the Health Visitors and General Practitioners has, for many years, been the subject of consideration at Conference level, and has received the approval of the Ministry as a step towards the integration of domiciliary health services. It is to be noted, however, that in no case have these discussions and recommendations dealt in any detail with the problem of larger industrial County Boroughs. It is true that individual pilot schemes have been tried and reported as being successful in rural areas, and in one or two specialised instances in fairly large cities, but so far no complete overall programme has been devised to arrange for the co-ordination of the health visitors work with large practices covering the entire town or city.

All of the general practices in St. Helens cover patients in every section of the borough, and even in the new larger housing estates one street may be visited by ten or twelve individual practitioners. The policy of the general practitioners since the inauguration of the National Health Service Act has been to reject the principle of group practices from Health Centres, and this has tended towards the retention of independent practices with a maximum of not more than three partners undertaking internal relief arrangements.

The difficulty of attaching Health Visitors to individual practices may, therefore, be well appreciated. One other difficulty is, of course, the existing staff shortage which is only now being remedied, to some extent, by internal staff training. The solution as regards our County Borough lies in the future, with adequate staffing and the hope that there will be a tendency towards the grouping of practices. In the meantime, however, it should be appreciated that all doctors in the town have complete access to Health Visitors' records and individual reports, and this system of contact is consistently encouraged through the Department.

The system of follow-up of hospital discharges at the moment is on the basis of individual requests and reports through the hospital almoner services. This service has necessarily been slow and gradual in development, and it must be remembered that in St. Helens we are only 15 years removed from "cottage hospital" administration. Through notification to the hospital, all the services of the Local Authority, e.g. welfare, home help, care and aftercare, are open to direct contact with the almoner service, and in particular individual reports of social and domiciliary conditions through the health visiting service are available, on request, to all hospitals in the area.

The following statement shows the home visits paid by Health Visitors during the year:

TO expectant momen	To	expectant	mothers
--------------------	----	-----------	---------

(a) first visits (b) subsequent visits					388 249
To infants under one year					
(a) first visits					1857
(b) subsequent visits	*****			*****	7538
To children aged one to five years	•••••	•••••			17362
To tuberculous households			*****		523
To other cases					2185
		-	Total	*****	30102

XIII.—HOME NURSING SERVICE.

During 1962, the Home Nursing Service was carried out by the St. Helens and District Nursing Association acting as agents of the Local Health Authority. This service is now under the direct supervision of the re-organised Committee of the Nursing Association on which is full representation from the Local Health Authority.

The staff establishment is 1 Superintendent, 2 Assistant Superintendents, and 21 District Nurses. The nurses paid 78,501 home nursing visits during the year, and there were 2,048 cases attended to during this period. An analysis of the cases and visits is given below.

Number of cases attended and visits made by Home Nurses during 1963.

Nature of Illness	Cases	Visits						
Medical	1,649	67,042						
Surgical	273	7,673						
Infectious Diseases	28	420						
Tuberculosis	34	2,329						
Maternal Complications	17	182						
Others	47	855						
Totals	2,048	78,501						
Patients (included in above totals) who were 65 years								
or over	1,029	53,708						
Children (included in above totals) who were under								
5 years of age	138	1,194						
Patients (included in above totals) who had more than								
24 visits during the year	652	69,802						

During 1962 the total number of cases attended, namely 2,048, showed a decrease as compared with 2,267 cases attended in 1961. There was a corresponding fall in the total number of visits paid to the cases throughout the year from 82,891 in 1961 to 78,501 in 1962. In individual categories there was a rather marked diminution in general medical cases attended, and also there were less calls for complicated cases of infectious disease. A further analysis of the cases shows that there was an increase in the number of visits paid to patients receiving more than 24 visits during the year, and this means that there was an increase in the number of long-term cases receiving attention and, in fact, in cases receiving attention more than once per day. Once again also there was an increase in the number of visits paid to persons aged 65 years or over, and indeed this forms a very large part of the total nursing work carried out in domiciliary care.

It should be noted here that under the published 10 year plan of the Regional Hospital Board, increased emphasis has been directed to the question of earlier discharge from hospital, which in turn will entail the expansion of the domiciliary nursing services. During the year allowance was made for this in the plans submitted to the Minister of Health by the Local Health Authority, and there is no doubt that over the next 5-10 year period the increased speed of bed clearance in hospitals is bound to throw more work on to the Home Nursing Service. This, together with the expected increase in the aged population of 65 years or over requiring home nursing and home attention, will open up a further expanding field for nursing services.

Each successful year of work by the Association is undoubtedly due in great part to the unremitting efforts of the governing Committee of the Association, and the thanks of the Local Authority must be expressed to the voluntary members of this Committee who give their services freely on behalf of the community. One must also remember the work of the members of the nursing staff who give untiring service in the domiciliary care of those persons in the town who require their services.

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XIV.—HOME HELP SERVICE.

The Home Help Service operating in St. Helens provides help in cases of maternity, sickness, convalescence, old age and infirmity, or any emergency in the household due to illness.

At the 31st December, 1962, there were 88 part-time Home Helps working an average 24 hour week, i.e. the equivalent of 42 whole-time staff.

During the year the Home Helps attended 535 cases, 185 of whom were new cases and 350 were old cases from previous years. An analysis of the cases dealt with is given below.

Table H.H.1.

		Approx. % of			Recovery		
Cases attended	No.	Total Cases	Full Time	Part Time	Full Fee	Part Fee	Free
Maternity Cases Domiciliary Confinements	20	3.7	19	1	4	16	
Hospital Confinements	1	0.2		1	1	_	
Ante-natal Cases	4	0.8	1	3	2	2	_
Sickness and other Cases Chronic Illness	52	9.7	_	52	10	6	36
Acute Illness	12	2.3		12	2	5	5
Tuberculosis	6	1.1	_	6	1	2	3
Mental Illness	—	_		_	_	_	_
Old Age and Infirmity	424	79.2		424	40	88	296
Blind	16	3.0		16	2	2	12
Total	535	100.0	20	515	62	121	352

Home help service for the 185 new cases during the year was recommended by the following:

Welfare Services (including Pilkington Bros. and W.V.S.)									
National Assistance Board	22								
Health Visitors and Midwives	9								
District Nursing Association	2								
Hospitals	5								
Personal application, neighbours and relatives	88								
Private Practitioners	14								
Society for the Blind	5								
Housing Department	4								

The following statement shows the visits paid by the Home Help Organiser during the year:—

Number of primary visits to cases		•••••	307
Number of return visits to cases	•••••		915
Number of visits to Home Helps			157
			1379

The standard fee during the year for Home Help Services, as laid down by the Health Committee, was increased from 3/9d. to 4/0d. per hour on 8.10.62. Reduction of this fee in part is based on an approved scale.

As the figures show, there was an increased amount of work carried out by the Home Help Service during the year. In the early months of the year, due to a widespread occurrence of respiratory diseases in the area, there was a greater demand for domiciliary help amongst aged people, and as a result the staff establishment was increased from the equivalent of 39 to the equivalent of 42 whole-time helps. The resultant addition to the staff rendered it possible to deal adequately with all demands on the service.

At the same time it was appreciated that under the 10 year development plan which had been submitted to the Ministry, the first increase in staff establishment fell due. In accordance with this, at the end of the year the staff establishment was increased from the equivalent of 42 to the equivalent of 46 whole-time helps. As had been foreseen in the development plan, the increase was no more than equal to the expanding demands on the service.

During the year, plans for the provision of a Night Attendant Service were completed, the service to commence in January, 1963, and will operate through the agency of the Women's Voluntary Service.

The intention of the service is to render temporary assistance to aged sick persons requiring attention during the night in cases where this cannot be provided by relatives. The scheme is to provide care for the reasonable needs of the patient during the night, but it is not a night nursing service.

The extent and scope of the service is shown below.

The service will be limited to the following cases:

- (1) Aged persons living alone (without relatives) and awaiting admission to hospital or hostel.
- (2) Aged persons living alone suffering temporary illness who would need admission to hospital if Night Attendant Service was not available.
- (3) Except in exceptional circumstances at the discretion of the Medical Officer of Health, the maximum continuous period for which a Night Attendant would be available in cases (1) and (2) above, to be two nights per week for a fortnight.

- (4) Aged person with relatives where aged person is a chronic sick case or suffering from terminal illness, where relatives normally look after them at home and where the relatives require one or two nights uninterrupted sleep. In this case, the Service would be limited to two nights in any one week.
- (5) The Night Attendant would be available between the hours of 10 p.m. to 7 a.m.

Medical assessment of need for the case will be carried out by a responsible member of the Health Department, e.g. Superintendent Health Visitor. Financial assessment will also be carried out by the Health Department, and a scale of allowances similar to that existing for the Home Help Service will be used.

Payment to the Night Attendants engaged by the Women's Voluntary Service will be on the basis of 15/- for each night (i.e. from 10 p.m. to 7 a.m.). Travelling expenses to the Attendant will also be payable.

The collection of any fees due from the applicant will be made through the Borough Treasurer's Department, and grants to the Women's Voluntary Service will be adjusted to the exact expenditure incurred by them.

XV.—INCIDENCE OF BLIND AND PARTIALLY SIGHTED PERSONS.

Welfare of blind persons in St. Helens is the responsibility of the Welfare Services Committee of the Local Authority. The majority of their activities in this sphere are undertaken on their behalf by the St. Helens and District Society for the Welfare of the Blind.

The Medical Officer of Health is responsible for arrangements for certification for registration.

During 1962, 78 completed forms B.D.8 were received by the Medical Officer of Health. Of these, 39 related to blind persons (i.e. 28 new cases and 11 re-examinations), 36 to partially sighted (i.e. 14 new cases and 22 re-examinations), and 3 were unclassified.

(a) Registered Blind Persons.

On the 1st January, 1962, there were 244 persons registered as blind in St. Helens. During the year 38 new cases were added to the register (including 9 cases formerly classed as partially sighted persons and one transfer from another area), 23 names were removed from the register due to death or transfer out of the Borough. Thus, at the end of 1962 there were 259 registered Blind persons in St. Helens. The following analysis gives the information as at 31st December, 1962, concerning the number of blind persons of both sexes according to age groups.

Age Distribution	:						Males	Females	Total
Age under 1 year	r	•••••	•••••	*****	•••••	•••••			-
1-10			•••••	•••••	*****	•••••	1	1	2
11-15	•••••	*****		•••••	•••••	•••••		1	1
16-20	•••••		•••••	•••••	•••••	** ** **	_		
21-29	•••••	•••••	•••••	•••••	•••••	•••••	2	3	5
30-39	•••••	*****	•••••	•••••	•••••	•••••	5	8	13
40-49	••••	•••••	•••••	•••••	•••••	•••••	13	12	25
50-59	•••••	•••••	•••••	•••••	•••••	•••••	16	10	26
60-64	•••••	•••••	•••••	•••••	•••••	•••••	8	6	14
65-69	•••••	•••••	•••••	•••••	•••••	•••••	15	17	32
70-79	•••••	•••••	*****		•••••	•••••	28	48	76
80-84	•••••	*****	*****	*****	*****	•••••	16	21	37
85-89	•••••	•••••	••••	*****	*****	•••••	7	17	24
90-	•••••	•••••	•••••	•••••	•••••	•••••	3	1	4
							114	145	259
							117	173	

Educational and Occupational distribution.

The following analysis shows the occupational states of the employed registered blind persons.

								Males	Females	Total
Education-	-At school		*****	****				1	2	3
	Not at sch	ool	•••••		•••••		•••••			
								1	2	3
Employmen	ıt—Worksh	ops						Males	Females	Total
Age	16-20	-							discount of the same of the sa	
	21-39		•••••					2	1	3
	40-49	•••••	••••			•••••	*****	4	1	5 5
	50-59		•••••	*****			*****	3	2	5
	60-64	•••••		•••••	*****	•••••		1		1
	65 & over	•••••		•···•	•••••		•••••	Management of the Control of the Con	frig plantelesses	M
								10	4	14
Employmer	nt—Elsewhe	ere						Males	Females	Total
Age	e 16-20				*****		*****	district temperally	Manager across	
	21-39	•••••				*****	•••••	1	1	2
	40-49					•••••	•••••	2 2		2 2
	50-59						·····•	2		2
	60-64	•••••	•••••	•••••	•••••	•••••	*****	1	t	1
							_	6	1	7

Thus 21 were employed during the year (16 males and 5 females).

The following table indicates the different types of occupation of the 21 registered blind employed persons noted above:

Occupation	Pla	Place of Employment							
Occupation	Work- shops	Home	Elsewhere	Total					
Basket Workers	4			4					
Brush Makers	4	_	_	4					
Cleaners	1	—	_	1					
Labourers	1		2	3					
Machine Knitters	3	_	_	3					
Miscellaneous	1	_	1	2					
Telephone Operators	_	_	1	1					
Typists		_	2	2					
Machine Tool Operators			1	1					
Totals	14		7	21					

The following table indicates the position of the remaining 235 unemployed registered blind persons with respect to training and capability for employment.

Classification	Males	Females	Total
Under Training			
Unemployed but capable of and available for work— Already trained	4 1 7 15 69 		4 1 30 26 173 235

Fifty-four of the persons registered as blind also suffered additional disabilities as indicated in the table below:

					Males	Females	Total
Mentally III					1	2	3
Mentally Sub-Normal	• • • • • • • • • • • • • • • • • • • •	•••••			3	\$14.00 males	3
Physically Defective		• • • • •			11	14	25
Deaf without Speech		••••	•••••		1		1
Deaf with Speech			•••••		3	2	5
Hard of Hearing		*****			6	10	16
Physically Defective and D	eaf or						
Partially Deaf				*	1		1
	Totals	•••••	*****		26	28	54

Of the twenty-one persons maintained in homes, 8 were in homes for the blind, 4 in other homes provided under Part III of the National Assistance Act, 1948, 3 in mental hospitals, 2 in mental deficiency institutions, and 4 in other hospitals.

(b) Registered Partially Sighted Persons.

During the year, 36 completed B.D.8 forms were received by the Medical Officer of Health in respect of partially sighted persons.

On the 1st January, 1962, there were 89 persons registered as partially sighed. Twelve new cases were admitted to the register during the year. Seventeen names were removed from the register for the following reasons: Death 7, transfer to register of blindness 9, transfer out of Borough 1. Thus at the 31st December, 1962, there were 84 persons registered as partially sighted within the Borough.

The following analysis gives the information concerning these persons by age groups:—

Age Distri	bution:—							Males	Females	Total
Age	5-15		****	•••••	•••••	•••••		1	1	2
	16-20		*****	•••••	*****	*****		2	2	4
	21-49	*****		•••••	•••••	•••••	•••••	10	6	16
	50-64	•••••	•••••		*****	•••••	*****	3	3	6
	65 and	over	•••••	•••••	•••••	*****	*****	15	41	56
								31	53	84

Educational and Occupational Distribution.

The following analysis shows the different states of occupation of the 84 partially sighted persons:

	Males	Females	Total
(a) Persons over 16 years of age—			
(i) Available for work	3	3	6
(ii) Not available for or not capable of work	7	18	25
(iii) Employed	2	1	3
(vi) Undergoing training	Streampoort	************	
(v) Requiring observation only	18	30	48
Totals	30	52	82
(b) Persons under 16 years of age—			
(i) Attending Special Schools		1	1
(ii) Attending other Schools	1	Simulation of the Control of the Con	1
(iii) Not at school	Siregenya-ret	School of the Sc	Singer-years
(iv) Ineducable	•	Driver-street	_
Totals	1	1	2

Particulars of Cases Examined.

The following table shows the analysis of completed forms B.D.8 received by the Medical Officer of Health during 1962 in respect of Blind and Partially Sighted Persons.

(i) Number of cases registered or re-examined			C	ause of	Disabil	ity	,	
during the year in respect of which Forms B.D.8	Cataract		Glauc	coma	Retro Fibro	lental plasia	Otl	ners
recommend:	M	F	M	F	M	F	M	F
BLIND (a) No treatment	6	10	1			_	8	4
(b) Treatment (medical, surgical or optical)	5	2	1	1	and the same of th			1
PARTIALLY SIGHTED (a) No treatment	8	9		1	Market	Steam safety	, 6	9
(b) Treatment (medical, surgical or optical)	1	2 .						
(ii) Number of cases under (i) above which on follow-up action have received treatment: (a) Blind cases	2		1	1	and the same of th			
(b) Partially sighted cases	1	1	-	_	_		_	

Registered Blind Persons

Of the 39 registered blind cases (28 new cases and 11 re-examinations) examined in 1962, 15 new cases were suffering from cataract.

Source of Notification.

43 persons for whom new Certificates B.D.8 were issued were ascertained as follows:

	Blind	Partially Sighted	Sighted	Un- classified
Welfare Staffs (including Home Teachers for the Blind)	17	10		1
Own General Practitioner	1	_	_	_
Unknown Source	6	2		_
Personal Request	_		2	_
Health Visitors	_	_	_	_
National Assistance Board	2	_	_	<u> </u>
W.V.S	_		_	
Hospitals	1	_		
Health Dept	1	_	_	_
Total	28	12	2	1

It will be seen that Welfare Department Staffs were responsible for 24 of the 43 notifications received and of those 24, 17 were found to be blind persons.

Acknowledgment is made to Mr. A. S. Underhill, Chief Welfare Officer, or the information contained in the above Section.

XVI.—GENERAL PROVISION BY THE HEALTH AND WELFARE SERVICES FOR THE CARE OF HANDICAPPED PERSONS INCLUDING EPILEPTIC AND SPASTIC PERSONS

The welfare provision for the care of handicapped persons, including Epileptics and Spastics, is undertaken by the Welfare Services Committee of the Council in accordance with the scheme approved by the Ministry of Health on 24th May, 1954.

At the end of 1961 there were 420 persons substantially and permanently handicapped on the register. Twenty-nine new registrations were affected during the year, 10 deaths occurred and 5 removals outside the Borough, making the resultant total of 434 at the end of December, 1962.

HANDICAPPED PERSONS

(a) Classification in relation to defect

Details of the numbers and classification of known handicapped persons in St. Helens are given below. These are classified under the appropriate Medical Research Council code and the figures shown in parenthesis denote the numbers who suffer from dual disabilities, e.g. deaf and partially sighted, blind and epileptic, etc.

Table H.P.1.

Details of registered handicapped persons in St. Helens classified in accordance with disability.

DISABILITY	Code	Male	Female	Total
Amputation	A/E	23(1)	4	27
Arthritis and Rheumatism	F	18(4)	15(3)	33
Congenital Malformations and Deformities	G	23	12(2)	35
Diseases of the Digestive and Genito-Urinary Systems; of the Heart or Circulatory System; of the Respiratory System (other than T.B.); and of the skin	H/L	77(6)	11	88
Injuries of the head, face, neck, thorax, abdomen, pelvis or trunk. Also injuries or diseases (other than T.B.) of the upper and lower limbs and of the spine	Q/T	64(11)	15(1)	79
Organic Nervous Diseases— Epilepsy, Disseminated Sclerosis, Poliomyelitis, Hemiplegia, Sciatica, etc	v	54(5)	28	82
Neuroses, Psychoses and other Nervous and Mental Disorders not included in V	U/W	24(1)	9(2)	33
Tuberculosis (Respiratory)	X	17(1)	3(1)	20
Tuberculosis (Non-Respiratory)	Y	er-ellerments	2	2
Diseases and Injuries not specified above	Z	26(1)	9	35
Totals		326(30)	108(9)	434

The Welfare Services Department act as liaison between statutory and voluntary sources so that the registered handicapped persons derive maximum benefit. Since the opening of the Social Centre for handicapped persons at the Congregational Hall, Brook Street, on the 18th March, 1957, there has been a steady increase in the numbers attending. At the end of 1962 there were 45 handicapped people on the attendance register, and an average attendance of 35 handicapped persons a week was maintained. During the year canework maintained its popularity in the field of basketry and trays, and there was also a renewed interest for rug making which was made for individual orders.

During the Summer season, those handicapped persons who attended the Centre were invited to two separate outings. The weather conditions were ideal and the outings which took place were to Chester followed by a tour round the Wirral, and on to New Brighton. The second, later in the year, was to Morecambe. In February arrangements were made for the same group to attend a pantomime at the Liverpool Empire. A Christmas party was held at the Congregational Hall, when suitable games were provided prior to tea, which was followed by an entertainment provided by various local artists, who gave their services free. In addition, the Welfare Services Committee provided each registered person who attended the centre with a Christmas gift.

The number of severely disabled persons attending the Centre increased, and it was necessary to order a further taxi, making three in all to transport these people to the centre.

(b) Grouping in relation to employability

The following table, H.P.2., shows the grouping of the 434 handicapped persons in relation to their employability. These are classified by sex in the five recognised employability groups.

Table H.P.2.

Age Group	Employability Group	Code	Male	Female	Total
Persons aged 16 & upwards	Capable of work under ordinary industrial conditions	Α.	203	34	237
	Incapable of work under ordinary industrial conditions but mobile and capable of work in sheltered workshops	В	56	16	72
	Incapable of work under ordinary industrial conditions and insufficiently mobile for work in sheltered workshops but capable of work at home	С	6	9	15
	Incapable of or not available for work	D	60	49	109
Children under the age of 16 years	Whose needs are likely to be met under other enactments but for whom the L.A. have a general responsibility under S.29 of the National Assistance Act, 1948	E	1		1
		Totals	326	108	434

Transport

Motorised tricycles and hand-propelled wheelchairs, together with garages and a concrete base for the garage, are provided free of charge by the Ministry of Health in individually permitted cases. Should further adaptations to the site be necessary, these are carried out by the Welfare Department, and it is a matter of regret that the Welfare Committee are under an obligation to make an assessment towards the recovery of the costs incurred. On the occasions when the adaptations are arranged privately by the disabled person, he has to meet the entire cost.

Adaptations

Adaptations to premises have been carried out at the home of three disabled persons at an approximate cost of £52, to enable them to live more normal lives in their own surroundings. Several gadgets were purchased from the Ministry of Labour Training Department, London, to assist the handicapped in overcoming their disability. On each occasion approval is requested from the disabled persons General Practitioner before gadgets are purchased.

Wheelchairs

Wheelchairs are available on loan at the Welfare Services Department to enable handicapped persons to be taken out of doors by their relatives or friends.

Car Badges for Severely Disabled Drivers

No applications for car badges were received during the year 1962, and the number of car badges issued to severely disabled drivers in St. Helens since the commencement of the scheme in October 1961 has been eleven.

Residential Accommodation

During the year, one handicapped person was admitted to Part III accommodation outside the Borough.

Epileptics

During the year, eight epileptics were in accommodation provided by the Welfare Authority. Of these, three males and three females were in colonies administered by voluntary organisations and one male and one female in accommodation administered by the Local Authority. There were thirty-seven known cases of epilepsy in the Borough. Of these, twenty-seven were male and ten female.

Table H.P.3.

Number of registered Epileptics under Classification V. of Table H.P. 1.

	Employed	Un- Employed	Total
Males Females	6 (1) 1	21 (4) 9	27 10
Total	7	30	37

CO-ORDINATION OF THE WELFARE OF AGED PERSONS

Since 1954 the Welfare Services Committee of the Council has operated a scheme for the care of the aged living within the Borough. During the year under review a further 169 elderly persons were registered and 73 deaths were recorded of the registered aged. There were similar fluctuations in the number of the blind and deaf. On the 31st December, 1962, the department was responsible for the welfare of 1,323 elderly persons. Of these 188 were in residential care, 259 were being visited by the Home Teachers for the Blind, 98 by the Chaplain for the Deaf, 10 by Voluntary Visitors and the remaining 768 by Welfare Visitors or Officers of the Welfare Department. During 1962 the staff of the Welfare Department made 5,677 visits to the elderly, together with 132 visits by Voluntary Organisations to aged persons who had expressed a wish to be visited. The elderly blind were visited in hospital by the Home Teachers and the elderly deaf in hospital were visited by the Chaplain for the Deaf.

Residential Accommodation

During the year 1962, 69 of the elderly persons known to the department became in need of care and protection and were admitted to residential accommodation, 25 having to be placed outside the Borough while the remaining 44 were provided with accommodation in local hostels. During the year under review 5 aged persons were admitted to the Council's hostels for a temporary period to enable their relatives who would normally care for them at home to partake of annual holidays or to enter hospital. Similarly, 1 aged person was admitted to accommodation outside the Borough. There are now 188 persons in Part III Accommodation, all of whom are visited at least once a year by the Welfare Services Visiting Sub-Committee.

The following table indicates the placement of persons in residential accommodation provided in compliance with Section 21 (1) (a) of the National Assistance Act, 1948.

	Males	Females	Total
St. Helens County Borough Council	59	49	108
Other Local Authorities	7	1	8
Voluntary Organisations	44	28	72
Totals	110	78	188

Other Services

As a result of regular visiting of the aged, many instances came to light where the needs could only be met by the National Assistance Board, Nationalised undertakings, various Corporation Departments or Voluntary Organisations. The co-operation of the Welfare Department with all these services is a regular feature of the Scheme and in this manner the varying needs of the aged can be satisfied.

I should like to express appreciation to the General Practitioners who have willingly advised and sought the assistance of the Department concerning their patient's welfare, also to the Clergy who have at all times attended to the spiritual needs of the elderly whenever cases have been brought to their attention.

Meals on Wheels

The Meals on Wheels Service commenced in 1956, and there has been a yearly increase in the number of hot meals delivered to the elderly and infirm in their own homes. The meals are prepared at the Council's hostels and the Town Hall Canteen and are delivered over four days per week. During the year under review Moss Bank Hostel prepared 3,600 hot meals, Nutgrove Hall Hostel 3,659 hot meals, and the Town Hall Canteen 2,628 hot meals, making a resultant total of 9,887 meals. Transport is provided from three sources: The Rotary Club of St. Helens distributing from Nutgrove Hall Hostel, the W.V.S. van distributing from Moss Bank Hostel and the Town Hall Canteen. On those days when the W.V.S. van is engaged at the Town Hall canteen delivery from Moss Bank Hostel is effected by paid taxi service. The Welfare Services Committee make an annual grant to the W.V.S., who organise the service for reimbursement of transport facilities. The charge per meal to the elderly was maintained at 1s. 0d. per meal, and the traditional Christmas fare was again available without cost to the recipient.

Launderette Service

The concessionary service available through the Bendix Launderette was continued during the year under review. This entitles pensioners to use the service at off-peak periods at a special reduced rate of 2s. 3d. per 9 lb. washing load. The service is available once per fortnight on Thursdays and Fridays at each of the town's launderettes. During the year 396 elderly persons were availing themselves of this service. In the case of housebound elderly persons who cannot attend at the launderette personally, ladies of the W.V.S. collect and deliver laundry and during the year over 1,000 collections were made.

Protection of Property

Where an elderly person is admitted to hospital and no suitable arrangements can be made by the patient for the protection of the moveable property contained in the house, protection can be undertaken by this department. The moveable property is insured and the Chief Constable kindly arranges police supervision of the premises. In the event of a tenancy not being preserved, all moveable property is transferred to accommodation provided by the Welfare Committee. On the death of an elderly person, where no satisfactory arrangements had otherwise been made, the burial was undertaken by the Committee and, where necessary, the estate was administered to the satisfaction of the Duchy of Lancaster.

Wheelchairs

The department has fourteen wheelchairs which are available for use by aged, infirm persons or for loan to relatives who wish to take their parents out during holiday periods. The service is free and all that is asked is that the chairs are maintained in good condition when in use. During the year the chairs have been continually in use, and it is considered this service will need extension.

General

Work at the new 60 place hostel being erected at Ashtons Green, St. Helens, is progressing, and it is anticipated that the hostel will be ready for occupation in the Autumn of 1963.

Pre-paid Post Cards

As each pensioner is registered they are issued with a pre-paid post card in order to summon assistance before the next visit is due by the visitor. During the year many of the registered persons returned their cards to the department for various needs and degrees of urgency.

Acknowledgement is made to Mr. A. S. Underhill, Chief Welfare Officer, for the information contained in the above section.

XVII.—INSPECTION AND SUPERVISION OF FOOD

Meat and Other Foods. The inspection and supervision of all meat at the Public Abattoir and at the private slaughterhouse is carried out by qualified meat inspectors.

CARCASES INSPECTED DURING 1962.

		PI	PUBLIC ABATTOIR	OIR		Private Slaughter- house
	Cattle excluding cows	Cows	Calves	Sheep and Lambs	Pigs	Pigs
Number killed	4235	4665	74	13879	1169	7737
Number inspected	4233	4665	74	13879	1169	7737
Condemned:— (a) All diseases except Tuberculosis and						
(i) Whole carcases condemned	-	5	9	9	2	62
organ was condemned (iii) Percentage of number inspected	784	1572	1	2980	422	2333
tuberculosis only:—	0.57%	33.7%	l	21.5%	36.1%	30.2%
(i) Whole carcases condemned	0	_	1		1	
	1	3	1	1	· m	74
	ı	%90.0	1	1	0.3%	1.0%
Cysticercocis:— Carcases of which some part or organ was condemned	2		1	!	1	
Carcases submitted to treatment by refrigeration	2	_	ı	ı	1	-
Generalised and totally condemned	-	I	1	ı		equation (

The practice was continued during the year of submitting to the Liverpool City Laboratories for examination specimens of parts of carcases or organs suspected to be affected with Cysticercus Bovis. 3 specimens were sent and in all cases the presence of 3 specimens were sent and in all cases the presence of Cysticercus Bovis was confirmed Table S.I.1 gives details of the results of such inspection.

Under the Slaughter of Animals Act, 1958, 1 licence was granted and 35 licences were renewed to slaughtermen for the year ended 31st December, 1962.

Unfortunately no conclusive reports have yet been received from the Public Health Laboratory Service on the specimens of glands sent for identification for tuberculosis.

During the year, however, in conjunction with the Animal Health Division of the Ministry of Agriculture, Fisheries and Food, 13 specimens of glands from 16 pigs and one cow were forwarded to their laboratory in Liverpool. The results of the examinations are set out below:—

			DIAGNOSIS		
Samples Submitted	Bovine T.B.	Avian T.B.	Other Organisms Staph. Strept. Inconclusive		
13	1	. 4	1	1	6

At the end of the year, 188 premises were registered under Section 127 of the St. Helens Corporation Act, 1933, for the preparation or manufacture of potted, pressed, pickled or preserved meat, fish, or other food intended for the purpose of sale.

During 1962, 3,249 visits were made by Inspectors to shops, stalls and other places where food is prepared or stored.

During the year a series of discussions were undertaken as between members of the Local Authority and the local meat trade regarding the economic background of the proposed new slaughterhouse, particularly in relation to the provision of a Meat Market.

The discussions were necessarily detailed, prolonged, and indeed, in many cases, repetitive. It was necessary to emphasise the point that any Meat Market must be economically self supporting and must not bear any subsidy from the rates, but there was some difficulty in bringing this into line with the views of the local meat traders. Several alterations to the basic plans were carried out by the Architects. It became apparent, but agreed, that progress was tardy, and that there would be no prospect of commencing the scheme before the appointed day under the Act. As a result, application was made to the Ministry for deferment of the appointed day, and by permission of the Ministry this date was fixed as the 1st January, 1965.

Public Health (Meat) Regulations, 1924.—No infringement of these Regulations was found during the year.

Merchandise Marks Act, 1926 and Orders.—Infringements of the Merchandise Marks Orders were dealt with by verbal warnings.

Food Hawkers.—Section 47 of the St. Helens Corporation (Electricity and General Powers) Act, 1948, requires the registration of any person (other than a person keeping open shop) who sells, offers or exposes for sale food from any vehicle or receptacle. The section also requires the registration of storage accommodation for any food intended for any of these purposes.

At the end of the year 41 persons and 71 separate sets of premises were registered under this section.

Food Hygiene Regulations and Clean Food Campaign

One Specialist Public Health Inspector engaged on Food Hygiene left during the year and for a period of three months the work was carried on by one Inspector.

The perusal of plans was once again very important in obtaining improvements to the standard of food premises. The changeover to supermarkets and self-service shops has highlighted the need for careful attention being paid to the wrapping of the goods on display due to the tendency of the public to handle them before purchase.

Alterations and improvements to licensed premises have continued during the year as a result of surveys previously made.

As an extension of the policy of bringing the food premises themselves up to standard, a series of nine lectures on food hygiene was arranged for food handlers in conjunction with the St. Helens Technical College. Fifty-two food handlers attended the Course and the interest displayed was very encouraging for the future series being arranged. Managements expressed their appreciation of the difference in attitude to their work paid by the food handlers after attending the course of lectures. The lectures were mainly concerned with the broad principles of food hygiene and continually emphasised the importance of the different precautions necessary to prevent food poisoning outbreaks.

The following are the particulars at the end of the year of the numbers and types of food premises in the Borough.

Grocers' and General Sho	ops			•••••	••••	••••		526
Butchers' Shops						•••••		88
Greengrocery and Wet Fi	ish S	Shops	S			•••••		66
Fried Fish Shops		•••••		•••••	•••••			74
Bakehouses				•••••	•••••			50
Snack Bars, Cafes, etc.				•••••		•••••	•••••	45
Industrial Canteens					•••••		•••••	37
Hawkers' storage premise	s		•••••	•••••		•••••	•••••	71
Dairies			•••••	•••••			•••••	14
Ice Cream premises (man	ufac	turin	g)	*****	•••••	*****	•••••	3
Miscellaneous food premi	ises	•••••		•••••	*****	•••••	*****	
Licensed Premises	•••••	•••••	•••••	*****	•••••	•••••	••••	159
Registered Clubs		••••	•••••	•••••	*****	•••••		53
School Canteens	•••••	••••	•••••	*****	•••••	•••••	•••••	39
Food Preparing Premises		•••••	•••••	•••••	•••••	•••••	•••••	18
Food Warehouses	•••••	*****	*****	•••••	*****	•••••	•••••	17
Market Stalls		•••••	•••••	•••••			•••••	38
							٠	
				To	otal	•••••	1	298

Premises registered under Local Acts.

The following are the particulars of food premises in the Borough registered under local Acts together with the numbers of inspections made in respect of each of these classes of premises:—

	No. of Premises	No. of Inspections
(a) St. Helens Corporation Act, 1933—Section 127—Premises used for the preparation or manufacture of potted, pressed, pickled or preserved meat, fish or other foods	188	337
 (b) St. Helens Corporation Act, 1933—Section 133— (1) Premises used for the manufacture and 		
sale of ice cream (2) Premises used for the sale of ice cream	314}	338
(c) St. Helens Corporation (Electricity and General Powers) Act, 1948—Section 47. Premises used by hawkers of food as storage accommodation	82	190
Premises registered under Milk and Dairies Regulation	s, 1949.	
Premises used as dairies	14	82

Disposal of Condemned Food.

Condemned meat and offals from the Public Abattoir are disposed of to a firm of animal foodstuffs and fertilisers manufacturers. This firm has given a guarantee that no raw meat will be sold to pet shops and that adequate steps will be taken for preventing the meat from getting into unauthorised hands. All condemned meat and offals are treated with a suitable colouring agent before release from the Public Abattoir.

Other classes of condemned foodstuffs are dealt with by treatment with disinfectant for the purpose of rendering them unmarketable, and are afterwards buried at the local refuse tip. Canned goods are punctured before release and are similarly disposed of.

The following are the total quantities of various classes of foodstuffs which were condemned during the year at the abattoir, or in shops, etc., owing to being diseased or unsound:

Meat	101,032 lbs.
Canned Goods	5,367 lbs.
Fish	— lbs.
Vegetables	— lbs.
Miscellaneous Foodstuffs	79 lbs.
	106.450.41
	106,478 lbs.

MILK AND MILK PRODUCTS

Milk and Dairies General Regulations, 1959.

At the end of the year there were registered under these Regulations:

16 persons as distributors of milk from dairy premises;

296 persons as distributors of milk in sealed bottles only from shops; and

14 premises as dairies.

Most of the milk received into dairy premises in St. Helens is delivered to those premises in sealed bottles. The administration of these Regulations does not now, therefore, constitute a serious problem.

425 visits were paid by the Public Health Inspectors to these premises during the year.

Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1960.

The following licences were in operation during the year under these Regulations:—

Dealers' Licences authorising the use of the special designation "STERILISED" 309
Dealers' Licences authorising the use of the special designation "PASTEURISED" 149
Dealers' Licences authorising the use of the special designation "TUBERCULIN TESTED MILK (PASTEURISED)" 101
Dealer's (Pasteuriser's) Licence authorising the use of the special designation "PASTEURISED" 1

Biological Examination of Milk.—In the routine examination of milk supplies 57 samples were examined by guinea-pig inoculation for the presence of tubercle bacilli. All were reported negative.

Bacteriological Examination of Milk.—In addition to the samples of milk taken for examination for tubercle bacilli, 62 samples of tuberculin tested milk were also taken for the methylene blue reduction test. The results of these examinations showed that 8 samples failed to satisfy the Methylene Blue Test required by the Regulations.

248 samples of pasteurised milk were also examined for the methylene blue (30 minutes) test. 6 samples failed to satisfy the test.

Examination of Milk for the presence of Phosphatase.—248 samples of milk were also examined during the year for the presence of phosphatase. All the samples passed this test.

Turbidity Test for Sterilised Milk.—During the year 54 samples were submitted for this test. All were reported to be satisfactory.

Milk-in-Schools Scheme.—All milk now supplied to schools under the Milk-in-Schools Scheme is milk for which a pasteuriser's licence has been granted. Careful supervision is exercised by the Public Health Inspectors and frequent samples are taken for chemical examination and for examination for bacterial contamination.

The number of samples taken during 1962 and the results are as follows:

1.	Samples taken for chemical analysis	219
	Number reported below standard	nil
2.	Samples examined for bacteriological cleanliness	10
	Number reported to be unsatisfactory	nil
3.	Samples examined for the presence of tubercle bacilli	8
	Number in which tubercle bacilli was found	nil

The chemical analyses of the above samples were carried out by means of the Gerber Test at the Department's own laboratory, and only in doubtful cases were samples examined by the Public Analyst.

Bacteriological Examination of Cream

In conjunction with the Public Health Laboratory the Methylene Blue Test was applied to 9 samples of cream.

6 samples were reported as unsatisfactory.

Upon investigation with the producers it was found that more attention to the methods of transportation and holding of this foodstuff before being retailed was required.

In view of the results obtained it is intended that further samples of cream be taken next year to see if the recommendations and observations made have been effective.

Ice Cream Premises.—The following are the particulars at the end of the year of registrations under the St. Helens Corporation Act, 1933, of manufacturers and vendors of ice cream and the premises used by them:—

Manufacturers and Vendors				•••••	•••••	3
Vendors only	•••••	•••••			•••••	288
Premises for manufacture and sale					•••••	3
Premises for sale only		•••••	•••••	•••••	*****	314

The 288 vendors mentioned above sell ice cream in wrapped packages only.

150 samples of ice cream were taken during the year for bacteriological examination by the Methylene Blue Test. These samples were taken from manufacturers and vendors whose premises are situate both inside and outside the Borough.

Results of Ice Cream Sampling

	Grade 1	Grade 2	Grade 3	Grade 4
Producers outside the Borough Producers inside the Borough	74 37	7 17	2 6	1
	111	24	8	7

70 samples of Lolly Ices were taken during the year for bacteriological examination and were reported to be satisfactory.

In cases where comparatively high count figures have been reported for certain samples the attention of the authorities concerned has been drawn to the results and in all cases later results have shown an appreciable reduction in the counts.

The comparator test with litmus paper was applied during the year to 38 samples of ice lollies as a check on their pḤ. value.

All vehicles used for the sale of ice-cream are provided with satisfactory supplies of hot and cold water and suitable washing facilities.

During the year, 338 visits of inspection were made to ice cream premises in St. Helens.

FOOD AND DRUGS.

Food and Drugs Act, 1955.—During 1962, 205 formal samples and 139 informal samples of various foods and drugs were submitted to the Public Analyst, and 9 (2.6%) were reported as adulterated.

The two prosecutions pending at the end of 1961 resulted in one offender being fined £2 and £2. 10s. 0d. costs, and the other offender being fined £5.

The attention of three manufacturers of ice lollies, potato crisps and smoked salmon spread was drawn to labelling infringements. As a result of this action the infringements in each case were rectified.

The Condensed Milk Regulations, 1959.

The Public Health (Dried Milk) Regulations, 1923 to 1948.

No infringements of these Regulations were found during the year.

Public Health (Preservatives, etc., in Food) Regulations, 1925-1958.—All samples submitted to the Public Analyst under the Food and Drugs Act, 1955 were also examined for the presence of preservatives.

Fertilisers and Feeding Stuffs Act, 1926.—4 samples of fertiliser were taken under the above Act during the year. They were reported to be satisfactory.

Pharmacy and Poisons Act, 1933.—At the end of the year there were 39 persons entered in the Local Authority's list of persons entitled to sell poisons included in Part II of the Poisons List. The number of premises concerned was 85.

103 visits were paid to these premises and no infringements of the Act were found.

Pharmacy and Medicines Act, 1941.—No infringements of this Act were found during the year.

Bakehouses.—There are 50 bakehouses in St. Helens and mechanical power is employed in 47 instances.

82 visits of inspection to these premises were made during the year.

DISEASES OF ANIMALS ACTS.

Tuberculosis Order, 1938.—No cases under this Order were reported during the year.

Anthrax.—There were no cases of Anthrax reported during the year.

Swine Fever.—2 cases of suspected Swine Fever were reported, and one was confirmed.

Foot and Mouth Disease.—No cases of Foot and Mouth Disease were reported during the year.

Fowl Pest.—No cases of Fowl Pest were reported during the year.

XVIII.—SANITARY CIRCUMSTANCES OF THE AREA.

WATER.—The water supply is from deep wells and boreholes in new red sandstone at Eccleston Hill, Whiston, Knowsley, Kirkby and Melling, supplemented by a supply from the Liverpool Corporation Rivington Main, and water from red sandstone above the coal measures at Clock Face and Collins Green. The water from the last-mentioned source is subjected to chlorination and high pressure filtration before distribution.

A duplicate borehole 500' deep has been completed at Knowsley Pumping Station to ensure future continuity of supply from this station.

A 15" watermain 5,100 yds. long from Carr Mill Dam to Messrs. British Sidac Ltd. has been laid to provide a non-potable water supply for industrial use. At the present a temporary supply of 300,000 gallons per day is being taken pending the completion of the headworks of miscrostraining, chlorination and pumping plant.

Approximately 240 yds. of 15" watermain has been laid in Rainford Road forming a section of a new distribution main which is to supply additional water from the high-pressure trunk mains into the town area.

The 10,000,000 gallon reservoir at Brown Edge has been emptied, cleaned of all sludge deposits, chlorinated, and put back into service after minor repairs were carried out.

The following new watermains have been laid in the St. Helens area during 1962:

3 1902.		
Location	Size	Length/Yards
Manning Street	3"	49
**	4"	141
Rainford Road	6"	36
Berwyn Grove	3"	17
Eldon Street Area	4"	673
Gamble Avenue	3"	100
Parliament Street	3"	50
Poynter Street	4"	25
Mill Lane	4"	390
,,	6"	234
Newton Road	4"	64
Easington Road	4"	127
,,	8"	102
Irwin Road	3"	68
Carnegie Crescent	3"	375
Stocks Avenue	4"	88
Knowsley Road	6"	60
Nutgrove Hall Drive	3"	28
,,	4"	40
,,	6"	184
**		

Location	Size	Length/Yards
Enfield Street	4"	35
Marshalls Cross Road Site	3"	149
,,	4"	205
Chancery Lane	4"	187
Scholes Lane	3"	23
,,	6"	308
Seddon Road	3"	112
Marine Drive	4"	82
Hard Lane	8"	86
Dorothy Street Housing Site	3"	34
,,	4"	1384
,,	6"	100
,,	8"	94
,,	10"	44
,,	15"	174

The principal mains extensions carried out during the year totalled 5,868 lineal yards.

Some 31,500 dwelling houses in the Borough (population 108,260) were supplied direct from public water mains throughout the year. There are no stand pipes in the area.

The supply has been satisfactory in both quality and quantity throughout the year. Bacteriological examinations of the water were made at regular intervals at the sources of supply, and at the reservoirs prior to distribution into supply, in all cases after chlorination. The number of samples examined during the year was 465, and all proved to be satisfactory.

In addition, 18 samples of tap water were submitted by the Public Health Inspector's Department for bacteriological examination.

The water supplied has no plumbo-solvent action.

All supplies are chlorinated before distribution.

RIVERS AND STREAMS.—The supervision of rivers and streams in St. Helens is carried out by the Mersey River Board.

DRAINAGE AND SEWERAGE

Drainage.—During the year contracts have been entered into and works commenced on the following Main Drainage Schemes:

- (a) Main Intercepting Sewer Reconstruction.
- (b) Sherdley Valley Intercepting Sewer.
- (c) Thatto Heath Intercepting Sewer (Alexandra Drive Section).

These works are to improve the existing main drainage system where affected by subsidence and to provide facilities for developing areas of land outside the present drainage areas for housing purposes.

Extensions to the sewerage system have taken place at Dorothy Street Housing Site and Marshalls Cross Road to cater for an additional 720 houses.

CLOSET ACCOMMODATION.—At the end of 1962 there were still in use 76 privy middens serving 116 premises, and 127 pail closets serving 112 premises.

PUBLIC CLEANSING

(a) During the year the first compression type refuse collection vehicle has been brought into service. The Council has approved a scheme for the replacement of the existing Side Loading Vehicles with modern compression type vehicles.

The use of bulk storage refuse containers has been extended, the total in use at the end of the year being

1½ cu. yds.—43. 18 cu. ft.—16.

Inquiries have continued into the possibility of composting as a means of refuse disposal by the mixing of household refuse and sewage sludge.

- (b) Tipping at Hard Lane was completed and the land reserved for tipping at Fleet Lane brought into use.
- (c) The whole of the household refuse collected is disposed of by controlled tipping.

HOUSE REFUSE ACCOMMODATION.—The scheme for the provision and maintenance of dustbins and the abolition of ashpits is now in operation throughout the Borough.

Staff shortage again seriously curtailed that part of the programme dealing with the abolition of fixed ashpits. By the end of the year 154 ashpits serving 280 houses had been demolished or converted under the scheme.

TAYLOR PARK PADDLING POOL.—6 samples were taken of the water in this pool for bacteriological examination. Treatment of the water was carried out at intervals throughout the summer months under the supervision of the Public Health Inspector's Department. 5 samples were also taken of the water in the boating pool, which is used for swimming during the summer months, and 1 sample from the drinking fountain.

ATMOSPHERIC POLLUTION.—For the measurement of atmospheric pollution in St. Helens the following observation stations are now maintained:—

Claughton Street Clinic	Standard Deposit Gauge. Lead Peroxide Instrument.
Albion Street Clinic	Standard Deposit Gauge. Lead Peroxide Instrument. Smoke Filter and Sulphur Dioxide Apparatus.
Eccleston Hill Waterworks	Standard Deposit Gauge. Lead Peroxide Instrument.
Victoria Park	Standard Deposit Gauge. Lead Peroxide Instrument.
Peasley Cross Isolation Hospital	Lead Peroxide Instrument.
Sutton Manor Sewage Works	Lead Peroxide Instrument.
Public Health Inspector's Office, Hardshaw Street	Smoke filter and Sulphur Dioxide Apparatus.
Carr Mill Clinic	do.

During the year three extra instruments were installed in consultation with the Department of Scientific and Industrial Research. These agreed sites are based on the Council's agreement to take part in the National Survey of Atmospheric Pollution undertaken by the Research Department.

All readings from these instruments are forwarded monthly to the Department of Scientific and Industrial Research for their collation and statistical use.

It is intended that a further instrument be installed in a particular area of the town when a suitable site becomes available.

327 observations were taken of industrial chimneys during the year. In 5 instances black smoke was emitted for more than two minutes during the half-hour period of observation. Representations were made with the firms concerned with a view to the diminution of the nuisances. As a result of consultations with the firms concerned, improvements in boiler plants and furnaces and in their operation have been effected. 107 inspections of boiler-house plant were made during the year.

During the year a further survey of industrial plants was made and the attention of various managements was drawn to the date when the seven year period of exemption under the Clean Air Act, 1956, will cease.

Factories.—6 defects were reported by H.M. Inspector of Factories during the year and 134 instances of unsuitable or defective sanitary conveniences were dealt with. A total of 227 visits of inspection were made to factories during 1962.

Table S.1.2. gives particulars of the administrative action taken under the Factories Act, 1937.

Table S.I.2. PART I OF THE ACT.

1.—INSPECTIONS for purposes of provisions as to health (including inspections made by Public Health Inspectors).

	Number		Number of	
Premises	on Register	Inspections	Written notices	Occupiers prosecuted
(i) Factories in which Sections 1, 2, 3, 4, and 6 are to be enforced by Local Authorities	37	6	2	_
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	303	184	27	_
(iii)Other Premises in which Section 7 is enforced by the Local Authority (ex- cluding out-workers' premises)	31	37	1	_
TOTAL	371	227	30	_

2.—CASES IN WHICH **DEFECTS** WERE FOUND

(If defects are discovered at the premises on two, three or more separate occasions they are reckoned as two, three, or more "cases").

	Number o	f cases in wh	ich defects v	vere found	Number of cases in which
Particulars	Found	Remedied	Ref To H.M. Inspector	_ *	prosecutions were instituted
Want of cleanliness (S.1)	1			-	
Overcrowding (S.2)	_		_		_
Unreasonable temperature (S.3)	_			_	_
Inadequate ventilation (S.4) Ineffective drainage of floors (S.6) Sanitary Conveniences (S.7)	2	_		_	
(a) insufficient	3	1		4	
(b) Unsuitable or defective	134	62		1	_
(c) Not separate for sexes	1		_	1	
Other offences against the Act (not in- cluding offences relating to Outwork)	_	_	2	_	_
TOTAL	141	63	2	6	

PART VIII OF THE ACT

OUTWORK

(Sections 110 and 111)

	S	SECTION 1	10		SECTION I	11
Nature of Work	No. of out- workers in August list required by Sec 110(1) (c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in unwhole-some premises	Notices Served	Prosecutions
Wearing apparel— making, etc Paper bags TOTAL					-	

SANITARY INSPECTION OF THE AREA.—The total number of visits made by the Public Health Inspectors was 27,810. The nature of these inspections is shown in Table S.I.3, and Table S.I.4 contains a list of notices served and the results of such notices.

TABLE S.I.3.

Number and nature of inspections during	1962.	
(a) Number of complaints investigated :-		
1. Housing defects	****** ****** ******	1014
2. Choked and defective drains	****** ****** ******	247
3. Emissions of smoke	****** ****** ******	50
4. Accumulations of offensive matter	****** ***** *****	. 15
5. Miscellaneous	****** ****** *****	151
(b) Inspections re Sanitation and Food Supply :-		
Dwellinghouses inspected		1312
Common Lodging Houses	****** ****** ******	51
Houses-Let in Lodgings	******* ****** *****	91
Tents, Vans and Sheds	******	227
Common Yards, Back Roads and Passages	000094 000000 00014	120
Pigstyes		89
Horse-manure Middensteads		50
Market — — — — — — — —		_ 39
Places of Public Entertainment		63
Public Sanitary Conveniences	000000 000000 00000	99
Schools		1
Ashes Receptacles	****** ***** *****	3
Smoke Observations	101010 110101 00000	327
Tips and Spoilbanks	******	72
Testing drains: By smoke	****** *****	104
By water	******* ******	9
By coloured water	**************************************	38
By breaking down	****** ****** *****	53
Smoke Control Areas	****** ****** *****	11
	Carried for	ward 2,759

TABLE S.I.3—continued.

Number and nature of inspections during 1962.

ctions re Sanitation and Food Supply—continued	2,
Factories Act, 1937:	
Factories without mechanical power	
Factories with mechanical power	••
Workplaces	
Outworkers	•••
Brokers' Premises	•••
Shops Act, 1950	. :
Fried Fish Shops	
Fishmongers' and Greengrocers'	••
Butchers' Shops	
Grocers', Sweet and General Shops	••
Confectioners and Cafes	
Bakehouses	
Canteens	
Private Slaughterhouse	
Public Houses, Beer Houses, etc.	
Food Prenaring and Storing Places	
Food Haviltors' Storage Assemmedation and Market Stalls	
Merchandisa Marke Acta & Orders	
MC 1 E .	
Direction of the second of the	**
T C D	
Samples of milk procured for bacteriological and biological examination	· P · •
Samples of Ice Cream	••
Samples of Ice Lollies	••
Samples of drinking water for bacteriological examination	••
Samples of swimming bath water for bacteriological examination	
Samples of cream	
Samples of other foodstuffs and swabs for bacteriological examination	
Samples of milk and other foodstuffs for chemical analysis	••
Samples of Fertilisers and Feeding Stuffs	•••
Pet Animals Act, 1951	•
Pharmacy and Poisons Act, 1933	
Prevention of Damage by Pests Act, 1949	4
Inspection of dwellinghouses and other premises for vermin infestation	••
Food Poisoning Enquiries	
Visits to work in progress	9
Visits re Housing—measurement for "Permitted Numbers"	
Hairdressers' and Barbers' Premises	
Atmospheric Pollution Gauges	
Rent Act, 1957—Inspections re Certificates of Disrepair	
Inspections re Improvement Grants	
Miscellaneous Visits (interviews, etc.)	2
Noise Control	
	•
Housing Survey	

Table S.I.4.

Number of defects for which notices were served during 1962, and notices complied with during the year (including outstanding notices from previous year)

Subject of Notices	Preliminary Notices	Statutory Notices	Number complied with		
Insufficient Water Supply Refuse accommodation	1 5		4		
Dampness arising from defective roofs, eaves- gutters, rainwater pipes and pointing		989	1079		
Defective and choked drains, closets, cesspools,					
etc Absence of proper sink	303 15	151 11	232		
Unsatisfactory yard paving Filthy or verminous condition of premises	7	5	6		
Accumulation of manure and offensive matter	5	1	1		
Other housing defects	1508 8	1153	1319		
Miscellaneous	9	2 2	5		
Animals	1				
Factories Act, 1937 Shops Act, 1950	30		14		
Shops Act, 1950 Nuisance Byelaws	279	_	331		
Food Hygiene Regulations, 1960 Food Byelaws, 1951		_	— —		
Rent Restriction Regulations, 1957 Ditches	1		<u> </u>		
Unauthorised use of land for camping purposes	1		17		
Food and Drugs Act, 1955 St. Helens Corporation, Electricity and General			17		
Powers Act, 1948	1	_			
	3470	2316	3033		

Referred to other departments:—

To Borough Engineer.							
Choked or defective sewers				••••	••••	••••	50
Choked or defective street gullies	••••	••••	••••	• • • • •	••••	••••	22
Waste of Water	• • • • •	••••	••••	••••		••••	142
Dangerous structures		••••		••••	••••		83
Unauthorised Erection	•••••	•••••					8
Camping—Illegal use of land	•••••	*****		•••••	•••••	•••••	24
To Housing Manager							
Choked drains and housing defects		••••	••••	••••	••••		74
Overcrowding	•••••	•••••	•••••	•••••			1
Director of Education							
Defects in Schools	•••••	•••••	•••••	•••••		*****	- 2

CHOKED DRAINS.—During the year 514 complaints of choked drains were made to the Department. Of this number 381 drains were freed from obstruction by members of the staff of the Public Health Inspector's Department thus obviating the necessity for serving notices upon the owners.

PREMISES AND OCCUPATIONS WHICH CAN BE CONTROLLED BY BYELAWS OR REGULATIONS

Offensive Trades.—There are no offensive trades carried on in the Borough.

Houses-let-in-lodgings.—There are 17 premises known to the Department to be used as Houses-let-in-lodgings.

During the year 91 visits of inspection were paid to premises of this nature.

Common Lodging Houses.—There is now only one common lodging house in the Borough.

As a result of a report by the Chief Public Health Inspector and Chief Fire Officer, the Council notified the keeper of one of the common lodging houses that the licence would not be granted after 31st December, 1961.

Discussions between the owner and the Chief Public Health Inspector were held and on alternative accommodation being found by the Chief Welfare Officer for many of the residents the common lodging house was voluntarily closed by the owner. No application for renewal of the licence was made to the local authority.

The remaining common lodging house is owned by the Council and administered on their behalf by the Salvation Army. This accommodation was purchased and improved by the Authority to set a high standard for such accommodation.

During the year 51 visits of inspection were made to the common lodging house.

Hairdressers and Barbers.—There were at the end of the year 195 persons registered as hairdressers or barbers, and the number of premises registered was 193.

361 visits of inspection were made to these premises during the year.

Byelaws with respect to Nuisances. — These byelaws prove very effective for the control of pig-keeping. There were 27 persons in the Borough known to be engaged in the keeping of pigs, at the end of the year. 89 visits of inspection were made to pig styes during the year.

St. Helens Corporation (Electricity and General Powers) Act, 1948. Noise Abatement Act, 1960.

62 observations and interviews were made during investigations of complaints of nuisances from noise during 1962. The noise sources ceased or were reduced as a result of informal interviews with the persons concerned.

Noise complaints during the year resulted from:—

- (a) Noise from a small compressor on premises in the Town centre.
- (b) Noise from a petrol engine working at night on a building site in a residential area.
- (c) Excessive use of a handbell by an ice cream salesman late in the evening.
- (d) Handling of milk bottles and crates at a depot in a residential area early in the morning.
- (e) Noise from a powerful vacuum pump in a factory adjacent to a residential area.
- (f) Noise from powerful compressors and impact noises from a factory adjacent to a residential area.
- (g) Noise from slamming lorry doors late in the evenings and early in the mornings at a road haulage garage in a residential area.
- (h) Noise from powerful compressors and fans in a factory which works both day and night.

Legal proceedings were taken on 12th January, 1962, against one ice cream manufacturer and five van drivers for offences against the Noise Abatement Act, 1960, committed on 27th July, 1961. Fines totalling £23 were imposed by the Magistrates. The hearing had previously been adjourned.

OTHER SANITARY CONDITIONS

Prevention of Damage by Pests Act, 1949.—Table S.I.5 gives particulars of the work carried out under the above-mentioned Act during the year.

The equivalent of two full-time Rodent Operators are employed by the Department for this work.

Shops Act, 1950.—In addition to statutory duties in regard to the ventilation and temperature of shops and the provision of sanitary conveniences, the Public Health Inspector's Department in St. Helens also takes responsibility for those provisions of the Act relating to lighting, washing facilities and facilities for the taking of meals.

- 9 infringements of the Shops Act, 1950, were found during the year. These were dealt with by service of informal notices.
 - 539 visits were paid to shop premises under the Act during 1962.

Table S.1.5.

Report for year ended 31st December, 1962

PREVENTION OF DAMAGE BY PESTS ACT, 1949

	Type of Property						
	Local Authority	Dwelling houses	Agri- cultural	All other (including business premises)	Total		
1. Total number of properties in Local Authority's district	100	31562	140	2729	34531		
 Number of properties inspected as a result of: (a) notification (b) survey under the Act (c) otherwise (e.g. when visited primarily for 	58 37	244 52	3 9	124 54	429 152		
some other purpose)	25	1142	20	620	1807		
3. Total inspections carried out	726	2210	92	996	4024		
4. No. of properties inspected which were found to be infested by: (a) Rats (b) Mice	56 33	249 34	11 1	111 65	427 133		
5. No. of infested properties treated by Local Authority	78	50	3	117	248		
6. Total treatments carried out	81	93	4	118	296		

Places of Public Entertainment.—63 visits were paid to places of public entertainment during 1962. The condition of these premises throughout the year was found to be generally satisfactory.

Mortuaries.—A Public Mortuary with post-mortem room is maintained behind the Town Hall, and is under the supervision of the Medical Officer of Health. During the year, 228 bodies were received into the mortuary and 196 post-mortem examinations were conducted.

Arrangements for the Disposal of the Dead.—At the end of the year there were 18.281 acres of land available for burials at the Borough Cemetery. Of the land adjoining the cemetery available for extension purposes, consisting of 23.8 acres, 8.47 acres has been used for the Crematorium and a Garden of Remembrance, leaving 15.33 acres for future earth burials. The Crematorium was opened on the 8th February, 1962, and during the year there were 228 cremations.

Swimming Baths.—The quality of the water in the swimming baths has continued satisfactory despite difficulties due to modernisation works.

Rag Flock and Other Filling Materials Act, 1951.—Owing to the continued shortage of Public Health Inspectors, no samples of rag flock or other filling materials were taken during the year.

Housing Act, 1957—Slum Clearance.—The two-year slum clearance programme approved by the Public Health Committee was completed and work was commenced on a further five-year programme.

The St. Helens (Sutton Nos. 1 to 8) Clearance Orders, 1961, and the St. Helens (Frazer Street) Clearance Order, 1961, were confirmed by the Ministry of Housing and Local Government in April, 1962. The St. Helens (Merton Bank Road) Clearance Order, 1961, and the St. Helens (Parr Street Nos. 1 and 2) Clearance Orders, 1961, were confirmed in May, 1962.

In addition, the 100 temporary aluminium prefabricated bungalows on the Carnegie Crescent site were designated as unfit for human habitation in January, 1962.

Under these orders, 223 properties will be demolished and approximately 228 new dwellings will be required to re-house the persons displaced.

During the year, five clearance areas were represented to the Public Health Committee—Chancery Lane (Nos. 1, 2 and 3) Clearance Areas, comprising 34 houses, and the Gerards Bridge (Nos. 2 and 3) Clearance Areas comprising 142 houses. Consequent thereon, the Council made the St. Helens (Chancery Lane No. 2) Compulsory Purchase Order, 1962, and the St. Helens (Gerards Bridge Nos. 2 and 3) Clearance Orders, 1962.

Undertakings by the owners to demolish were accepted in respect of 8 unfit houses and certificates of unfitness were given in respect of 4 houses owned by the Authority.

Demolition and re-housing continued during the year as follows:—

		Houses Demolished	Persons Re-housed	Families Re-housed
	Clearance Areas	155	569	188
	Undertakings to demolish by owners	93	139	55
` ´	M.O.H Pre-fabricated bungalows	14 28	28 60	7 23
(+)	Tre-rabilicated bullgarows			
	Total	290	796	273

XIX.—HOUSING.

Housing

(1)	Number	of	dwellinghouses	erected	during	1962	in	the	various
	wards of	the	Borough.						

Local	N.E.	S.E.	C.	N.W.	S.W.	H.	E.S.	W.S.	Р.	M.B.	Total
Authority					_		24		179		203
Private											
Enterprise		1		1		1	3	45	3	12	-66

(2) Total number of houses completed during the year within the Borough:—

(a) with State	assistance	under	Housing	Acts
----------------	------------	-------	---------	------

(i)	Local Authority		 	 	203
\ _ /	Local Hachtonic,	*****	 	 	200

(b) without State assistance

(ii)	Private	Enterprise						66
------	---------	------------	--	--	--	--	--	----

Rent Act, 1957

The following are particulars of applications received under this Act during the year:—

(1) Number of applications for Certificates of Disrepair	30
(2) Number of decisions not to issue Certificates	1
(3) Number of decisions to issue Certificates	
(a) in respect of some but not all defects (b) in respect of all defects	21 9
(4) Number of Undertakings given by landlords	15
(5) Number of Certificates of Disrepair issued	10
(6) Applications by landlords for cancellation of Certifi-	
cates	4
(7) Objection by tenants to cancellation of Certificates	1
(8) Certificates cancelled by Local Authority	3
(9) Decisions by Local Authority to cancel certificates	
in spite of objection	

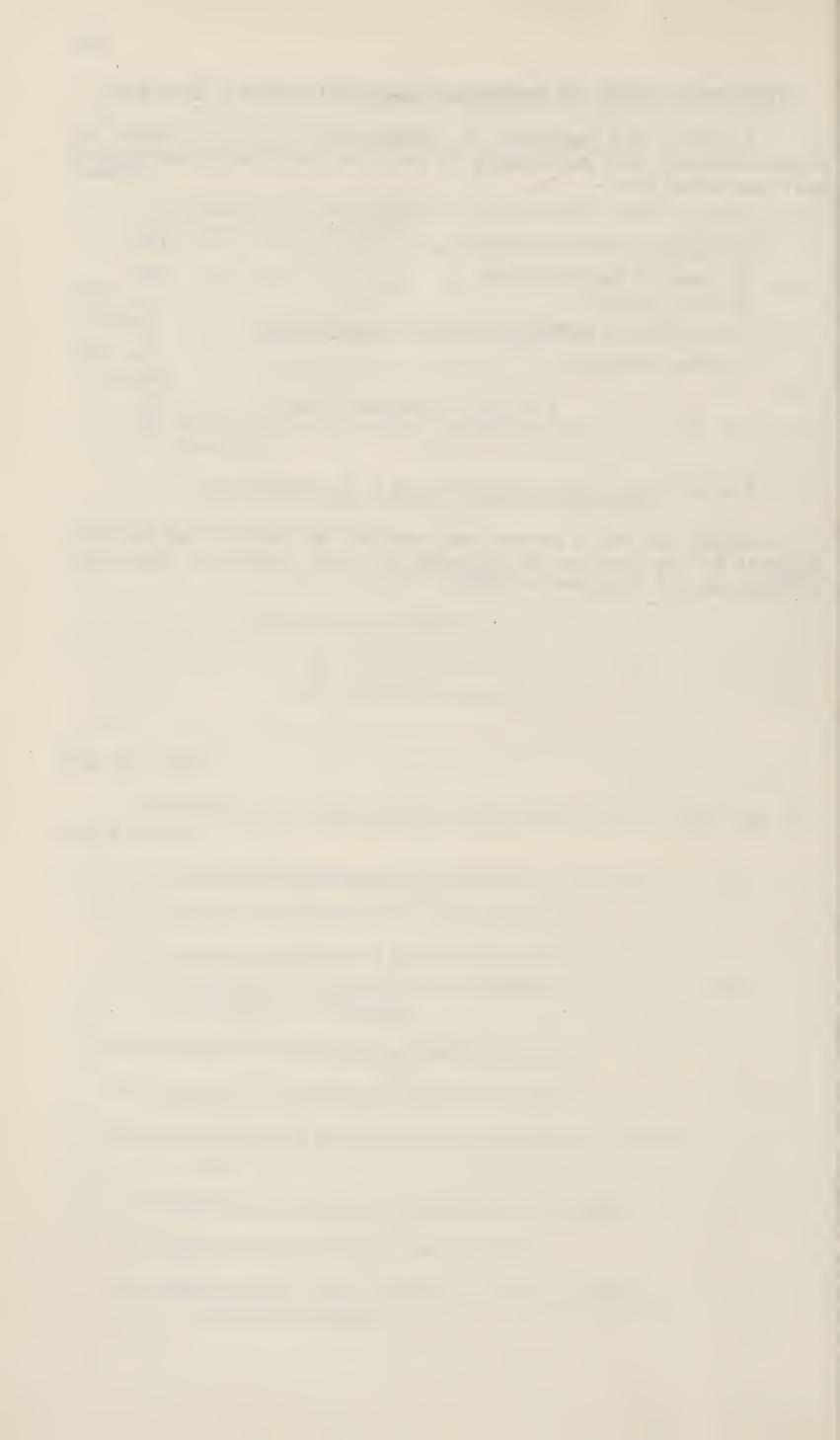
DISINFESTATION OF PREMISES AND HOUSEHOLD EFFECTS

A total of 913 inspections of dwellinghouses and food premises for vermin infestation were made during the year, and the following disinfestation work was carried out:—

(1) Privately owned dwellinghouses	••••	149
(2) Occupied Council houses		309
(3) Food premises	• • • • •	4
(4) Corporation buildings, other than dwellinghouses	••••	22
(5) Other buildings		34
Total No. of premises treated	••••	518

The insecticides used were either D.D.T. or Gammexane.

During the year 2 persons were sent to the Peasley Cross Isolation Hospital for the cleansing of themselves and their clothing. In these cases bedding was also disinfested by steam.



COUNTY BOROUGH OF ST. HELENS HEALTH DEPARTMENT

DEVELOPMENT OF LOCAL HEALTH AUTHORITY SERVICES OVER THE NEXT TEN YEARS

(Ministry of Health Circular 2/62)

Consultation and Co-operation

(a) Existing Scheme

Existing measures of consultation and co-operation, as developed from the 1948 Proposals of the Council in connection with the National Health Service Act, 1946, appear to be adequate. The Local Executive Council, the Local Hospital Management Committee and the St. Helens Medical Committee are represented on the Health Committee. The Medical Officer of Health is a member of the Executive Council, the St. Helens Medical Committee, and the Medical Advisory Boards of the Local Hospital Management Committee and Rainhill Mental Hospital. In connection with Mental Health, the Medical Superintendent of the Mental Hospital is a member of the Mental Health Sub-Committee of the Local Authority. These arrangements will continue, and it is considered that they provide a close day-to-day administration between the bodies concerned and provide adequate channels for consideration of future planning under Circular 2/62.

(b) Proposed Developments

(i) Internal

The Health and Welfare Departments of the St. Helens Local Authority function as separate Departments. It is proposed that a Health and Welfare Joint Sub-Committee should be set up to co-ordinate the work of the Departments and to ensure the most effective overall use of the domiciliary services controlled by both Committees. In particular, this Committee would review the expansion of any new necessary services.

(ii) External

The Proposals of the Local Health Authority as submitted herewith have been sent to the Liverpool Regional Hospital Board.

(iii) Circular 7/62

In connection with Circular 7/62, it is proposed that the Local Authority should constitute a Joint Advisory Committee. This Committee will be known as the Community Services Committee and will consist of representatives from Voluntary Organisations in the area, and from the Local Executive Council and the Local Medical Committee. This Committee will assist in the co-ordination of Voluntary and Local Authority agencies in the area providing domiciliary services, and their recommendations will be submitted to the Health and Welfare Committees.

Health Centres

No plan for the provision of comprehensive Health Centres in the town has been considered over the next ten years. It should be noted that this matter has been discussed at Local Medical Committee level, but this Committee has decided that the provision of Health Centres is not desirable in the County Borough and would not have the support of the Local Medical Practitioners.

Care of Mothers and Young Children

(a) Existing Scheme

The development plan approved by the Ministry in 1948 regarding services for the care of mothers and young children has proceeded. Additional Clinic premises have been completed for the Sutton Manor area, the Carr Mill area and the construction of a new Clinic is nearing completion for the Parr area of the town.

All necessary additional ante-natal sessions, including Consultant sessions, have been provided at ante-natal Clinics. As regards the provision of dental services for mothers and young children, it has been impossible to expand beyond its present strength of the equivalent of two treatment sessions per week, owing to the inability of the Local Authority to recruit dental staff. At the same time, provision is made in the annual estimates for such a service, should staff become available, and in new Clinics reservations are designed for use as dental suites, should it be possible to provide an expanded service in the future.

No expansion of Day Nursery provision in the town is considered necessary over the next ten years.

(b) Proposed Developments

Plans will be submitted for new Clinic Centres for the Sutton area and the Blackbrook area as shown under Part II of the summary of the plan.

Health Visiting and Nursing staff will be increased in this service appropriately as shown under Part III of the plan.

The ante-natal services of the Local Health Authority must at present remain unaltered and be based on Local Authority Clinics, staffed by Local Authority Medical Officers. This arises from a decision of the Local Medical Committee following a review of the Cranbrook Report. The Committee could not agree that the establishment of a small panel of General Practitioner Obstetricians would be desirable in the area, but acknowledged the right of each suitably qualified practitioner to have his name on the Obstetric List. This List has a total of 49 Practitioners and the staisfactory medical staffing at Clinics from a list of this size obviously presents great difficulties to the Local Authority. Until the Obstetric List is reduced to a smaller number, it is difficult to plan integration of General Practitioners into Local Authority Ante-Natal Clines.

Midwifery

(a) Existing Scheme

The work of the Domiciliary Midwifery Services has continued under the development plan of the 1948 Proposals. At present 29% of confinements in the town are domiciliary. The present discharge from hospital is based on a stay of ten days after delivery. Under the 1948 plan it was proposed that the ultimate establishment of Midwives for the town should be 15 plus one Supervisor. In fact, owing to poor recruitment, this establishment has never been reached, and at present stands at 11 Midwives and one Supervisor. The outlook for recruitment appears to be poor.

(b) Proposed Developments

It is considered that the existing establishment of 15 Midwives plus one Supervisor would adequately cover the proposed domiciliary demand and also the nursing of cases discharged from hospital under the present ten-day stay arrangements. Owing to the poor recruitment outlook, it is expected, as a future policy, that recruitment of local part-time midwifery assistants from available married women may have to be considered for the nursing of early discharge cases, leaving the Midwives to concentrate on domiciliary confinements.

Health Visiting

(a) Existing Scheme

Under the 1948 Proposals an ultimate establishment of 24 Health Visitors and one Superintendent was visualised. Within this figure the Council have, up to the present, given authority to recruit to a strength of 21 Health Visitors, and one Superintendent, but in fact this has never been achieved. At present the staff is 15 full-time and 2 part-time Health Visitors (who also serve as School Health Visitors), with one Superintendent. Despite the fact that St. Helens is a training centre, the intake from students barely balances the wastage in resignations and transfers to other Authorities.

(b) Proposed Developments

Based on the population of St. Helens, according to the Ministry of Health Working Party Inquiry into Health Visiting, allowance should be made in St. Helens for a staff of 25 Health Visitors. This, in fact, is the ultimate establishment mentioned under (a) above, and, therefore, no increase in the establishment of Health Visiting staff is contemplated over the next ten years.

Home Nursing

(a) Existing Scheme

Under present arrangements, the Home Nursing Service is undertaken for the Local Authority by the St. Helens District Nursing Association. The present establishment is one Superintendent, two Assistant Superintendents and 21 District Nurses.

(b) Proposed Developments

The Home Nursing establishment as above will be reviewed periodically and an estimated staff increase over the 5-10 years periods will be made to allow for increased duties in the nursing of geriatric cases and chronic sick persons in the community. Provisional increases of four nurses in the first five years, and four nurses in the second five-year period is proposed, but this estimate must be subject to review in the light of future demands.

Vaccination and Immunisation

(a) Existing Scheme

Under the development plan this service has been greatly expanded over the past few years to include schemes for immunisation against poliomyelitis in particular and also for expanded schemes for B.C.G.

(b) Proposed Developments

It is considered that allowance should be made for the equivalent of half the time of an Assistant Medical Officer to this service. Extra clerical assistance has already been allocated by the Local Authority to this service and no increase is contemplated over the next ten years.

Ambulance Service

(a) Existing Scheme

The present fleet of 10 vehicles has been reached under the development plan, together with staff of one Superintendent and 4 Station Supervisors, 24 Driver/Attendants, a Fitter/Mechanic and a Clerk/Telephonist.

(b) Proposed Developments

It is considered that the present staff of Driver/Attendants is adequate to cover any expansion of the service over the next ten years. Allowance will, however, be made for one extra general division clerk to augment the administrative sides when the new Ambulance Station is opened. This Station is at present under construction.

Prevention of Illness, Care and After-Care

(a) Existing Scheme

Under the 1948 development plan, a basic scheme for the prevention of illness, care and after-care was operated. This consisted of the provision of nursing requisites in the home, a scheme for the re-housing of tuberculous families and administration through national agencies of welfare provisions for tuberculous families and families suffering from other illnesses. Over the years the service has been developed by approval of the Minister to include the following:

- (1) B.C.G. Vaccination of all classes of persons as may be approved from time to time by the Ministry of Health.
- (2) A scheme for laundry service for bed linen and clothing for chronic sick and a loan service for the same purpose.
- (3) A scheme for occupational therapy in clinics and in homes for patients suffering from tuberculosis or other illnesses.
- (4) A scheme of preventing physical neglect or risk of mental illness of children or the break-up of problem families and the rehabilitation of such families.

- (5) A scheme for temporary care for mentally subnormal persons elsewhere than in the home.
- (6) A scheme for the provision of chiropody services for aged and physically handicapped persons and for expectant mothers.

It is considered that these Proposals cover adequately the existing field of domiciliary care, and may only require expansion in administration and domiciliary visiting over the next ten years to make adequate provision for the town.

Consideration has been given by the Development Sub-Committee to the question of the provision of a convalescent service for the town.

The Sub-Committee are recommending this to the Health Committee for agreement in principle that especially in the case of elderly people suffering from illness at home, some form of convalescence should be made available to those who are not provided for through other welfare sources.

(b) Proposed Developments

Allowance will be made in the first five years of the plan for one General Division Clerk, who will be shared 50% between the Care and After-Care Service generally, and 50% to the Chiropody Service. The existing appointment of one whole-time Welfare Officer will be continued, and in the second five-year period provision will be made for the employment of an Occupational Therapist for the development of domiciliary schemes. This appointment will be shared with the Mental Health Service.

Domestic Help

(a) Existing Scheme

Under the existing scheme for domestic help, there has been a gradual expansion to accommodate the ageing population. The Authority now employs the equivalent of 42 full-time Helps.

A recent expansion in the staff has been made to meet increases in the demands on the Service on the administrative side by the appointment of a Clerical Division clerk.

(b) Proposed Developments

A new Service for evening help between the hours of 7-10 p.m. is to be introduced as an extension of the day Home Help Service. This is to provide evening care for elderly persons or for persons suffering from slight disability who may have to retire early and wish to be settled for the night. Provision will be made for elementary bed care, but no nursing measures will be undertaken.

A scheme for Night Attendants is also to be introduced. This will provide night care for aged and sick persons under the following conditions:

(1) Aged persons living alone (without relatives) and awaiting admission to hospital or hostel.

- (2) Aged persons living alone suffering temporary illness who would need admission to hospital if Night Attendant Service was not available.
- Officer, the maximum continuous period for which a Night Attendant would be available in cases (1) and (2) above, to be two nights per week for a fortnight.
- (4) Aged person with relatives (where the aged person is a chronic sick case or suffering from terminal illness), where relatives normally look after them at home and where the relatives require one or two nights uninterrupted sleep. In this case, the Service would be limited to two nights in one week.

The scheme will, in the first place, be operated through the agency of the W.V.S. for Civil Defence by means of Local Authority grants.

In order to allow for expected expansion of domestic help services, allowance is made for the equivalent of four whole-time Helps per year to augment the staff at least during the next five years.

Mental Health

Proposals for the expansion of the Mental Health Services were submitted to the Minister and approved on 29/4/1960. Expansion of the Service will take place in accordance with these Proposals submitted under Section 28 of the National Health Service Act. The Proposals include a programme of capital building to provide a Junior Training Centre, Adult Training Centres and Hostels as outlined in Part I and training schemes for Student Mental Welfare Officers and Student Teaching Staff as outlined in Part III.

As regards administrative staff, allowance is made in the first five years for one General Division Clerk or typist.

APPENDIX

The Appendix to this Report is divided into three parts and outlines:

Part I Net Revenue Expenditure.

Part II Capital Programme.

Part III Staff.

COUNTY BOROUGH OF ST. HELENS LOCAL HEALTH AUTHORITY SERVICES

APPENDIX—PART I
Net Revenue Expenditure

(including loan charges and capital expenditure from revenue)

Approx. Estimate for 1971-2	£ 26,761 19,604 19,025 27,869 3,863 34,956 6,986 27,143 54,830 12,527 1,464	235,028
Estimate for 1966-7	£ 24,542 18,004 18,280 25,069 3,793 34,956 6,687 27,143 42,126 12,527 1,464	214,591
Estimate for 1965-6	£ 24,485 17,204 17,535 24,369 3,758 33,031 6,667 25,663 41,316 12,527 1,464	208,019
Estimate for 1964-5	£ 23,374 16,484 16,790 23,669 3,723 34,167 6,647 24,183 31,414	194,338
Estimate for 1963-4	£ 22,294 16,164 14,297 22,940 3,838 31,625 6,708 22,397 24,729 12,047	178,503
Estimate for 1962-3	£ 21,810 15,866 12,956 22,243 4,222 29,994 6,033 18,125 11,671 1,464	162,699
SERVICE	Health Centres Care of Mothers and Young Children Midwifery including Expenditure as Local Supervising Authority Health Visiting Home Nursing Vaccination and Immunisation Ambulance Service Prevention of Illness, Care and After-Care (ex. Mental Health) Domestic Help Mental Health Expenditure under other enactments and on General Administration Expenditure on Local Health Services not reckonable for General Grant	Total for Local Authority Health Services

MME	1967/1972	Pro- Pro- Pro- Pro- On Pro- On Pro- Pro- On Pro- Pro- Pro- Pro- Pro- Pro- Pro- Pro-					
-CAPITAL PROGRAMME	1966/1967	Effect on Revenue					
ITAL F	961	Pro- visional			ų.		
	1965/1966	Effect on Revenue					•
PART II-	196	Pro- visional cost					
SERVICES	1964/1965	Effect on Revenue					
	1964	Pro- visional cost					
LOCAL HEALTH AUTHORITY	1963/1964	Effect on Revenue				+£4,000	+£9,050
LTH A	1963	Pro- visional cost				£2,000 (From Revenue)	£35,000
AL HEA	1962/1963	Effect on Revenue	+£2,000	+£3,850	+£8,125		
	196	Pro- visional cost	(61/62) £8,000 £8,400	£42,000	£41,850		
COUNTY BOROUGH OF ST. HELENS.		Need	To replace present inadequate and unsatisfactory accommodation on the first floor of rented premises.	To provide suitable accommodation to replace present temporary and inadequate premises.	To provide accommodation for the training of mentally subnormal pupils up to the age of 16 years.	To provide a temporary Adult Training Centre in premises already owned by this Authority which will discontinue its present role as a Junior Training Centre when the Centre referred to in No. 3 above is completed.	Residential accommodation to serve pupils attending the Junior Training Centre and the short-term care of patients (up to 16 years) discharged from hospital.
UNTY BOROUGE		Location and Size	At Ashtons Green, St. Helens, on a community centre in the centre of the area to be served, and is surrounded by housing estates on which there is a planned development of 750 houses.	At Jackson Street, St. Helens Garage and H.Q. services for 10 vehicles and 1 Civil Defence vehicle.	At Ashtons Green, St. Helens. 50 place Centre.	Sinclair Street, St. Helens.	At Ashtons Green, St. Helens, adjacent to Junior Training Centre. 25 place hostel approx.
00		Scheme	Ashtons Green Health Centre	Ambulance Service Headquarters	Ashtons Green Junior Training Centre	Adult Training Centre	Ashtons Green Hostel

COUNTY BOROUGH OF ST. HELENS. LOCAL HEALTH AUTHORITY SERVICES PART II—CAPITAL PROGRAMME

			1962	1962/1963	1963/	1963/1964	1964	1964/1965	1962	1965/1966	1960	1966/1967	1961	7/61/1961
Scheme	Location and Size	Necd	Pro- visional cost	Effect on Revenue										
Hostel, Abbey Road	At Abbey Road/ Hard Lane, St. Helens. 20 place hostel.	To provide residential accommodation for the rehabilitation of mentally disordered persons already in the community, or on discharge from psychiatric hospitals.			£32,500	+£5,650								
Maternity and Child Welfare Clinic, Sutton	At Irwin Road, Sutton, St. Helens.	As replacement for an existing clinic with inadequate accommodation and facilities in an adapted building in Elizabeth Street, St. Helens.			£16,400	+£1,450							`	
Health Centre, Blackbrook	In the Parr, Blackbrook area of St. Helens. Exact site not yet allocated.	To provide a comprehensive service to an existing large community by the replacement of inadequate rented premises.					£17,000	+£2,050						
Adult Training Centre	Location not decided. 45-50 places.	To provide additional accommodation for the training of mentally subnormal persons over the age of 16 years.											£42,000	+£8,000
Hostel for Mentally Sub-normal Persons	Location not decided. 20-25 places.	To provide residential accommodation for mentally sub-normal persons over 16 years of age.					_						£35,000	+£8,600

Programme after 1972-No projects beyond 1972 have, as yet, been planned by this Local Health Authority.

COUNTY BOROUGH OF ST. HELENS

Additional information to be included on Part II (Capital Programme) of the return submitted under Ministry of Health Circular 2/62. LOCAL HEALTH AUTHORITY SERVICES

LIST OF PREMISES AT 31st MARCH 1962

	Remarks	Will continue to function.	Will continue to function.	Unsuitable. Will cease to function on opening of new premises at Irwin Road, Sutton, St. Helens, during 1963/64	Will continue to function.	Ultimately will be replaced by adaptation of adjoining premises, owned by the Local Health Authority, which at present are leased to the Local Education Authority.	Unsuitable. Will cease to function on opening of new premises at Ashtons Green, Parr. St. Helens, during 1963	Unsuitable. Will cease to function on opening of new premises in Parr/Black-brook area during 1964/65.	Unsuitable. (Rented from Public Buildings Committee of St. Helens Council). Will be considered for replacement when new Municipal Administrative	Building is provided in 5/6 years. (35 places). Will continue to function.	Unsuitable. Will cease to function on opening of new premises at Jackson		Unsuitable. Will cease to function on opening of new premises at Jackson
.706	Full-time or Part-time Use	Full	Full	Full	Full	Full	Part	Part	Full	Full	Full	Full	Full
AI SIST MARCH, 1962.	Location	Near Town Centre	Moss Bank/Carr Mill	Sutton	Sutton Manor	Thatto Heath	Рагг	Blackbrook	Town Centre	Town Centre	Town Centre	Town Centre	Town Centre
LIST OF FREMISES AT	Purpose	Care of Mothers and Young Children	Care of Mothers and Young Children	Care of Mothers and Young Children	Care of Mothers and Young Children	Care of Mothers and Young Children	Care of Mothers and Young Children	Care of Mothers and Young Children	Care of Mothers and Young Children	Day Nursery	Ambulance Service	Ambulance Service	Ambulance Service
	Premises	A. Maternity and Child Welfare Centres (1) Owned by Local Health Authority Albion Street	Carr Mill Clinic	Elizabeth Street Clinic	Jersey Street Clinic	Lacey Street Clinic	Nunn Street Clinic	Brookfield Mission Hall	Hardshaw Street Clinic B Day Nursery		C Ambulance Service (1) Owned by Local Health Authority Ambulance Garages & Workshop, Tolver Street	Ambulance Headquarters, Birchley Street	Ambulance Garages, Haydock Street

Additional information to be included on Part II (Capital Programme) of the return submitted under Ministry of Health Circular 2/62.

LIST OF PREMISES AT 31st MARCH, 1962.

Remarks	45+ places. Will continue to function, but will be adapted as an Adult Training Centre when the new 50+ place Junior Training Centre at Ashtons Green, Parr, is completed in 1963.		Unsuitable. Will continue to function. Rented from Estates Committee of St. Helens Council.	Unsuitable. Will continue to function. Rented from private firm.	Unsuitable. Will continue to function Rented from Regional Hospital Board.	Unsuitable. Will continue to function. Rented from Estates Committee of St. Helens Council.	
Full-time or Part-time Use	Full		Full	Full	Full	Full	odated either The accom- or such staff e or six years. The St. Helens e Block and will continue
Location	Near Town Centre		Town Centre	Town Centre	Town Centre	Town Centre	lerical Staffs are accommisse of the Town Hall. provisions will be made for the rected in the next five on an agency basis by the their own Administrativable for the purpose and
Purpose	Mental Health Service		Welfare Foods & Chiropody Service	M. & C.W. Service Midwifery Service Home Help Service	Prevention of Illness Care and After-Care	Mental Health	Medical, Health Visiting, Nursing and Clerical Staffs are accommodated either in the main building or within the curtilage of the Town Hall. The accommodation provided is inadequate and provisions will be made for such staff in a planned new Administrative Block to be erected in the next five or six years. Agency Arrangements The Home Nursing Service is provided on an agency basis by the St. Helens District Nursing Association, who own their own Administrative Block and Nurses' Home. These premises are suitable for the purpose and will continue to function in full-time use.
Premises	Junior Training Centre (1) Owned by Local Health Authority Training Centre, Stanley House, Sinclair Street, St. Helens	Other Accommodation In addition, owing to lack of accommodation in the Central Administrative Buildings, the following premises modation in the Central Administrative Buildings, the following premises are rented by the Local Health Authority. All will continue to function until such time as special provision is made for these services in a planned new Municipal Administrative block, within the next five or six years.	Welfare Foods Centre & Chiropody Service, Bickerstaffe Street, St. Helens.	M. & C.W. Midwifery Offices and Home Help Service, Corporation Street, St. Helens	Care & After-Care Office, Chest Clinic, Claughton Street, St. Helens.	Mental Health Offices, Hardshaw Street, St. Helens	

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COUNTY BOROUGH OF ST. HELENS LOCAL HEALTH AUTHORITY SERVICES

PART III—STAFF

Showing approximate whole-time equivalent in each case and excluding staff for School Health Service

1971-72	31-16-119-119-119-119-119-119-119-119-119
1966-67	31-14 118 266 7 662 662 11 663 11 11 11 11 11 11 11
1965-66	31 13 17 25 7 6 30(10) 11 58 6
1964-65	31/2 11/2 11/6 224 7 6 30(10) 10 54 6 6
1963-64	21/2 112 115 23 7 6 30(10) 3 3 3 4 4
1962-63	21 12 12 22 7 6 30(10) 10 46 —
31/3/62	$ \begin{array}{c} 2\frac{1}{1} \\ 112 \\ 111 \\ 222 \\ 7 \\ 7 \\ 7 \\ 8 \\ 43 \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ -$
Category of Staff	Doctors (including M.O.H.) Dentists Domiciliary Midwives Health Visitors Home Nurses Staff (other than domestic) in Day Nurseries Other Nursing Staff in the Health Services Ambulance Staff (Total of all grades) (Given number of vehicles in brackets) Staff (other than domestics) in Training Centres for Mentally Subnormal Home Helps (including supervisory staff) Staff (other than domestic) in residential accommodation under S.21/48 or 28/46 Staff (other than domestic) in non-residential centres for the handicapped under S.29/48 Domiciliary Social or Welfare Workers: (a) University or equivalent professional training (i.e. almoners, psychiatric social workers and family case workers) (b) General training in social work (i.e. with certificate of Social Workers Training Council when available) (c) Other social workers (d) Welfare assistants (e) Other staff: Occupational Therapist Council Welfare Assistant